



Ontario

ROYAL COMMISSION OF INQUIRY INTO CERTAIN
DEATHS AT THE HOSPITAL FOR SICK CHILDREN AND
RELATED MATTERS.

Hearing held
8th floor
180 Dundas Street West
Toronto, Ontario

The Honourable Mr. Justice S.G.M. Grange

Commissioner

P.S.A. Lamek, Q.C.

Counsel

E.A. Cronk

Associate Counsel

Thomas Millar

Administrator

Transcript of evidence
for


19 April 1984

VOLUME 133

OFFICIAL COURT REPORTERS

Angus, Stonehouse & Co. Ltd.,
14 Carlton Street, 7th Floor,
Toronto, Ontario M5B 1J2

595-1065



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ROYAL COMMISSION OF INQUIRY INTO CERTAIN
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Hearing held on the 8th Floor,
180 Dundas Street West, Toronto,
Ontario, on Thursday, the 19th
day of April 1984.

THE HONOURABLE MR. JUSTICE S.G.M. GRANGE - Commissioner
THOMAS MILLAR - Administrator
MURRAY R. ELLIOT - Registrar

APPEARANCES:

| | |
|----------------------|--------------------------------|
| P.S.A. LAMEK, Q.C.) | Commission Counsel |
| E. CRONK) | |
| D. HUNT) | Counsel for the Attorney |
| L. CECCHETTO) | General and Solicitor General |
| | of Ontario (Crown Attorneys |
| | and Coroner's Office) |
| I.J. ROLAND) | Counsel for The Hospital for |
| M. THOMSON) | Sick Children |
| R. BATTY) | |
| B. PERCIVAL, Q.C.) | Counsel for The Metropolitan |
| D. YOUNG) | Toronto Police |
| W.N. ORTVED | Counsel for numerous doctors |
| | at The Hospital for Sick |
| | Children |
| B. SYMES | Counsel for the Registered |
| | Nurses' Association of Ontario |
| | and 35 Registered Nurses at |
| | The Hospital for Sick Children |
| H. SOLOMON | Counsel for The Ontario |
| | Registered Nursing Assistants |
| D. BROWN | Counsel for Susan Nelles - |
| | Nurse |

(Cont'd.)...



APPEARANCES: (Cont'd.)

| | |
|--------------------|---|
| C. THOMSON, Q.C.) | Counsel for Phyllis Trayner - |
| G.R. STRATHY) | Nurse |
| E. FORSTER) | |
| M. ROSENBERG | Counsel for Sui Scott - Nurse |
| J.A. OLAH | Counsel for Janet Brownless - R.N.A. |
| B. KNAZAN | Counsel for Mrs. M. Christie - R.N.A. |
| S. LABOW | Counsel for Mr. & Mrs. Gosselin, Mr. & Mrs. Gionas, Mr. & Mrs. Inwood, Mr. & Mrs. Turner, Mr. & Mrs. Murphy (parents of deceased children) |
| F.J. SHANAHAN | Counsel for Mr. & Mrs. Dominic Lombardo (parents of deceased child Stephanie Lombardo) and Heather Dawson (mother of deceased child Amber Dawson) |
| W.W. TOBIAS) | Counsel for Mr. & Mrs. Hines |
| G.R. SOLOMON) | (parents of deceased child Jordan Hines) |
| J. SHINEHOFT | Counsel for Lorie Pacsai and Kevin Garnet (parents of deceased child Kevin Pacsai) |



I N D E X o f W I T N E S S E S

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Phyllis TRAYNER, Resumed 577

Examination by Mr. Lamek (Continued) 577



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--- on commencing at 10:00 a.m.

PHYLLIS TRAYNER, Resumed

THE COMMISSIONER: As you know, we are not sitting either tomorrow or Monday.

The question has been raised as to whether we will sit next Friday, and in the ordinary course we would not be sitting next Friday, but in the interests of the witness, I think if there is a good chance of completing the evidence on Friday, we might well do that. If there is no reasonable chance of completing it on Friday, we will just carry on in the ordinary way and proceed to the next Monday.

Sorry I can't help you much more than that, but we will see what the position is Wednesday or Thursday of next week. Obviously it has been a long session already for Mrs. Trayner and we would like to finish it next week if possible. But we can't do that at the expense of rushing people's cross-examinations.

Yes, Mr. Lamek.

MR. LAMEK: Thank you, sir.

EXAMINATION BY MR. LAMEK (Continued):

Q. Mrs. Trayner, on our travel through the list of deaths we had reached I think



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Charlon Gardner.

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A. Right.

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Q. Charlon Gardner as you may recall had died at 4:25 in the morning of March 18th. She was a child who was in Room 418 on your side of the floor, and in order to see what the nursing assignment situation was that night, the assignment book discloses that you were on duty and had no patient assignments. You were in charge of the ward.

Mrs. Scott was looking after Gardner in Room 418 and providing shared care for that child, plus one other. Miss Brownless had three patients in Room 418 and four in Room 425, and Mrs. Christie had four patients in Room 421, one in 423 and one in 426.

A. Yes.

Q. There is no indication that there was anybody relieving on the floor that night. It appears, therefore, that you and Mrs. Scott were the two RNs on duty on the ward; Miss Brownless and Mrs. Christie, both RNAs, were also on duty, and Mrs. Scott, as I have said, was on a shared nursing care assignment with Gardner and one other.

Now, do you have any recollection of Charlon Gardner?



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A. No.

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Q. Would looking at the chart assist you in any way to form a recollection? I am sure you have done that in the last few weeks.

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A. No, it doesn't.

7

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Q. All right. Do you have any recollection of the shift, the long night shift of March 17 to 18?

9

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A. No, I don't.

11

Q. Or of the arrest of that child?

12

13

A. No.

14

Q. Do I take it from that that you cannot tell me who relieved Mrs. Scott if Mrs. Scott took breaks that night?

15

16

A. No, I can't.

17

18

Q. We can agree, at least, if Mrs. Scott took breaks, she would have to be relieved because she was on shared nursing care?

19

A. That is correct.

20

21

Q. Now we know, as I have said, that you and she, you and Sui Scott, were the only RNS on duty that night.

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A. Right.

24

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Q. And I have told you earlier I



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think of Miss Brownless' evidence and Mrs. Christie's evidence that they had never relieved for breaks of a nurse who was on shared or constant nursing care. Do you recall my telling you that?

6

A. Yes.

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Q. In the light of that evidence and the light of the observation that you were the only other Registered Nurse on duty and had no nursing assignments, is it reasonable to infer that you probably were the one who relieved Mrs. Scott that night?

12

A. If she took a break, yes.

13

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17

18

Q. Yes. And indeed Miss Brownless (and this is at Volume 116, Mr. Commissioner, page 6270), beginning at line 8 was asked by Miss Cronk, and I am reading this to you in the hope that it may either jog your memory or help you to be of a little more assistance to me on the likelihood of your having relieved Mrs. Scott:

19

"Q. Did you at any time that night..."
This is to Miss Brownless.

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"...while you were in Room 418 taking care of your three patients observe any nurse in that room other than Sui Scott?"



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"A. Other than Sui Scott?"

3

"Q. Yes."

4

"A. Phyllis Trayner."

5

"Q. Can you tell me please when

6

you saw Mrs. Trayner in Charlon
Gardner's room?"

7

"A. Well, I can't recall what

8

times. It was just before Charlon

9

Gardner took a turn, Sui Scott wasn't

10

in the room, I was in the room doing

11

something with one of my children.

12

I can't recall if I was finishing

13

feeding or vital signs, and Charlon

14

Gardner's monitor started dropping

15

and Phyllis turned to me, she was

16

tending to the other child that Sui

17

was looking after, and said, go get

18

Sui, and I left the room to get her

19

and she came back in the room, and

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that's all I can recall."

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"Q. Was it shortly after that

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episode that Charlon Gardner went into

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arrest?"

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"A. That's correct."

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If Miss Brownless' evidence or



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recollection be correct, does that suggest also, Mrs. Trayner, that you were in there looking after Scott's patient - she said you were tending to the other one and Sui Scott was not in the room because you had to send Brownless to get her?

A. That is correct.

Q. Can we reasonably infer from that that you were relieving Sui Scott?

A. I don't know if we can assume that I was relieving her. I may have been on rounds and checking the other baby.

Q. But to the extent that you have told me that one could reasonably infer from the fact that you were the only other Registered Nurse on the floor that one, you were relieving Scott if she took breaks, does Brownless' recollection assist us in establishing that as a likelihood in your view?

A. Well, it is a likelihood, yes.

Q. Yes. Okay. And we know from the chart, and Mr. Commissioner, that is on page 57, that the child got into trouble with the apex dropping at 3:35 in the morning. And whether you were doing rounds and Scott was out of the room or whether you were in fact relieving her, Miss Brownless' recollection is you were there and Scott was not shortly



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before 3:35 in the morning. Right?

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Now fairly I have to say to you also that Mrs. Scott doesn't recall who relieved her that night. She was confident that she took breaks, but she couldn't recall who relieved her, but said it was probably you because she could not recall having been relieved by an RNA for breaks when she was on shared and constant nursing care.

I take it that you have no recollection as to whether you gave any medications to the child, Charlon Gardner, on the night that she died?

A. No, I don't.

Q. Or recorded any vital signs or anything of that sort?

A. I looked through the flow sheets. I didn't recognize any of my writing.

Q. It appears that on the night of the 17th (this is at page 102 of the chart, Mr. Commissioner) on the medications sheet - sorry, 102 --

A. On this one?

Q. It appears, does it not, that Mrs. Scott signed for the nine o'clock digoxin dose?

A. Right.

Q. And for the nine o'clock aldactazide dose?



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A. Right.

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Q. And there was no other
medication to be given that night?

5

A. Right.

6

Q. And your name doesn't appear
on the medications sheet?

7

A. Right.

8

9

10

Q. And if we look at page 118,
which is the flow sheet, the sign-off signature, if
you will, is that of Mrs. Scott?

11

A. Right.

12

13

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Q. Are you able from the vital
signs that are recorded there to help me as to whether
any of them appears to be in your writing? Do you
recognize your writing?

15

A. No, not there.

16

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Q. All right. So there is
nothing in the chart that assists us in knowing
whether you relieved the child at the time when the
vital signs had to be taken in any event?

20

A. Right.

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Q. And I take it, therefore,
we have exhausted your recollection as far as Charlon
Gardner is concerned?

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A. Right.

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Q. All right. We won't dwell longer on Charlon Gardner but move on to the night that Allana Miller died.

Could we have the chart, please, Mr. Registrar?

Again just to recite the facts of the death, Mrs. Trayner, Allana Miller died at 3:27 in the morning of March 21st.

A. Right.

Q. She was in Room 423 and we have heard that is the room with a single bed.

A. Right.

Q. She was alone in that room. No other patients with her.

A. Right.

Q. Okay. Again to set the assignments that night you were in charge of the ward.

A. Right.

Q. And at the beginning of the shift had a patient in Room 418 and one in Room 426, but the notation in the assignment book is "till 2300 only".

A. Yes.

Q. Do you recall that your patient assignment ended at 2300?



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A. Yes. We had called Janet Brownless back.

Q. She came in -- she was on relief until eleven o'clock, was she?

A. Right.

Q. But was to come back to 4A at 11:00 and at that point she was to take over your nursing assignment plus a couple of other children?

A. Right.

Q. Was that because you were expecting the admission of Justin Cook that night?

A. That is correct.

Q. He was expected at about eleven o'clock?

A. 10:30, yes.

Q. All right, 10:30 to 11:00. So Miss Brownless was going to come back and help because the admission of a child occupies nursing time I take it?

A. That he was a sick infant at the time. It was an emergency.



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Q. So, until 11 o'clock at night you had those two patient assignments, Miss Nelles was in charge of Allana Miller in Room 423 and she also until 11 o'clock at night had a couple of patients in 418. Mrs. Christie had three children in 425, two in 421 and until 11 o'clock one in 418?

A. Right.

Q. And then Miss Brownless, who was relieving until 11 o'clock, was to come on at 11 and stay for the rest of the shift and was to take over three children in 418 and one in 426?

A. Right.

Q. Now, can we start at the beginning of that shift, please. Your team had been off duty for a couple of days, had it not?

A. Right.

Q. Indeed, if we look at the WIN sheet for that week, and again I am using the version that Mr. Roland doesn't approve of but I think it accurate in this respect, it shows for the week of March 16th to 22 that your team had worked the long night on Tuesday the 17th.

A. Yes.

Q. And then had been off entirely on the 18th and 19th of March and came back on duty



B.2

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on the evening of Friday the 20th?

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A. Right.

4

Q. All right. Now, you will remember that Kevin Pacsai had died on the 12th of March?

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A. Yes.

7

8

Q. When you came on duty on the evening of the 20th do you recall any reference to or discussion of Kevin Pacsai?

9

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A. Yes, I do.

11

Q. Can you tell me how that arose?

12

A. Susan Nelles was on the floor at that time just after report was taken.

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Q. Yes.

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A. And had told us at the back of the nursing station, there was myself, Bertha Bell, that's all I can remember being there at that time, and Sue had told us that Liz Radojewski had called her earlier in the week and had told her that there would be a coroner's inquest into Baby Pacsai and that he had a high digoxin level and she told us that the level she was told was 25.

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THE COMMISSIONER: 85?

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THE WITNESS: 25

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THE COMMISSIONER: 25.

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THE WITNESS: She also said that Mrs. Radojewski had told her to write down everything that she could remember about Baby Pacsai because she would probably be called to give evidence on that baby. I can remember that's about as far as it went at that time.

MR. LAMEK: Q. But is it your recollection that on that occasion you learned from Miss Nelles of her information that the Pacsai level had been 25?

A. Right.

Q. Was there any discussion among you of that digoxin level when you first heard it?

A. I think the discussion was '25, are you sure'. There was a further discussion later at the back of the nursing station with a couple of the doctors.

Q. Yes.

A. And it was felt that there had to be a mistake, that it could not have been 25 and that it was more likely to be 2.5.

Q. Do you recall who those doctors were?

A. Dr. Nelles and Dr. Paul Runge.

Q. I take it you were present at that conversation?



B.4

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A. Yes.

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Q. Was Miss Nelles also present?

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A. This was our first coffee break,
we had sat down at 10:15.

5

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Q. Do you recall whether any other
nurses were present at that time?

7

A. Bertha.

8

Q. Yes.

9

A. I can't remember if Janet
Brownless was down at that time for a coffee break or
not.

11

12

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Q. And was it the consensus that
25 must be an error and the real level must be 2.5,
there had been a decimal point misplaced?

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A. That was the feeling, that we
had never heard of a level of 25 and the only level
that we had ever heard of was greater than 5 and that
was with Janice Estrella.

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Q. Right.

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A. And nobody really knew at that
time how much greater than 5 it was, it was just
greater than 5 and it was surprising to find out that
they came up with a level of 25.

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Q. Yes.

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A. So, it was assumed that they



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made a mistake and the decimal point should have
been at 2.5.

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Q. Was it your understanding that
the inquest was to be held because of Pacsai's high
digoxin level?

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A. I understood that the father
was extremely angry.

8

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Q. Yes.

10

A. Had wanted to know why the baby
had died.

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Q. Yes.

A. And that they were going to
have the inquest to find the reasons.

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Q. Was it your understanding that
the digoxin level which was reported to you and which
you discussed was one of the reasons for having an
inquest?

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A. Yes.

Q. Now, if as you thought the level
must be 2.5 and not 25, did you regard that as a
sufficiently high level to cause concern and have an
inquest?

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A. Well, I was under the impression
that a level over 2 was high with our children. I
also believe though that Mr. Pacsai was extremely



B.6

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upset and that was the basis for calling the inquest.

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Q All right. Did you at a subsequent time learn that the level was indeed 25?

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A Yes.

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Q When did you learn that?

7

A From the police and I think that's after Susan Nelles' arrest.

8

9

Q Not until after certainly 24th of March?

10

A Right.

11

12

Q All right. And in recounting this tale of Nurse Radojewski's call to you, how was Miss Nelles, was she --

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14

THE COMMISSIONER: Call to - I'm sorry?

15

THE WITNESS: To Susan.

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MR. LAMEK: Q In recounting to you the story of Mrs. Radojewski's call to her, how was Miss Nelles, was she calm, was she concerned about the inquest. How was she, what was your impression?

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A She was angry that Mrs. Radojewski had bothered her on her time off to tell her about the inquest. Just that it was her time off and I don't think Sue actually regarded it as being extremely important that it couldn't have waited until Liz could have seen her face to face and told her.



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Q She had been the nurse in charge of Pacsai the night that he died?

A. Right.

Q Did she express any concern about a high dig. level on that occasion, I mean, on the Thursday evening in either of the two conversations on Thursday - on Friday evening, I'm sorry?

A. That if it was a high level and the baby had come from McMaster Hospital that maybe the high level came from McMaster because he was a query dig. toxicity from there.

Q Did she at that time, that is to say, on the Friday evening, make any comment about the digoxin which she had administered to him according to the orders on his chart?

A. No, not that I can recall.

Q All right. During the first part of that shift -- One other question, I'm sorry, about the Pacsai matter. As we have said, your team had not been on duty for the couple of days preceding Friday the 20th when you came on in the evening?

A. Right.

Q When you came on shift in the evening of Friday did you learn that Dr. Fowler in



B.8

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the course of Wednesday the 18th and perhaps Thursday
the 19th, had been making any sort of investigation
or inquiry on the floor about digoxin?

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A. No, I wasn't.

6

Q. All right. Did you subsequently
learn that Dr. Fowler had made such inquiries or
investigations?

7

8

A. Only that you told me.

9

Q. Okay, but not until then?

10

A. No.

11

Q. Okay. Now, let's take the
period until 10:30 because, as I understand it, it was
about 10:30 that Cook arrived to be admitted to the
ward.

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A. Right.

15

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Q. From the beginning of the shift
until 10:30 you have a recollection of seeing Allana
Miller?

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A. No, not at that time, no.

19

Q. I take it however you must have
seen her when you did your rounds?

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A. Right.

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Q. As team leader you would visit
all the patients in the course of the shift on a
regular basis, as you have told us?

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A. Yes. I can recall talking to Susan about Allana Miller during that evening before 10:30.

Q. Do you recall what information you were getting as to Allana Miller's condition?

A. I think she just told me what her heart rate was, she told me that she had given her some apple juice and that she had settled her for sleep.

THE COMMISSIONER: I'm sorry, what?

THE WITNESS: She had given her some apple juice.

THE COMMISSIONER: Yes, but what had she done to her sleep?

THE WITNESS: Settled her.

THE COMMISSIONER: Settled her.

MR. LAMEK: Q. And as you recall it had she prior to Cook's arrival on the ward said anything to you that indicated concern about Miller's condition?

A. No.

Q. All right. I think you referred to a coffee break that you and Miss Nelles had when Dr. Nelles and Dr. Paul Runge were present. When did that occur?

A. Susan and I sat down about 10:15.



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DM/cr

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Q. At the nursing station?

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A. At the nursing station, back of
the nursing station.

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Q. Yes. Were Doctors Nelles and
Runge also present?

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A. Yes.

8

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Q. Was that the first time, so
far as you are aware, that Miss Nelles had sat down
that shift to have a bit of a break and a cup of
coffee?

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A. Yes.

12

Q. And the first time you had?

13

A. Yes. We both decided at that
time because we were expecting Justin Cook to arrive
shortly.

14

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Q. And how long were the two of
you there?

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A. We were there for about 15
minutes when Justin Cook arrived on the floor.

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Q. And having the discussion
that you told me about about the Pacsai digoxin level?

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A. Yes.

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Q. Was there any other discussion
about any of the children on the ward during that
conversation that you can now recall?



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A. No.

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Q. Or any of the deaths that had occurred on the ward?

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A. No.

6

Q. And then what happened?

7

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A. Justin Cook arrived and both Susan and I had left the back of the nursing station to meet the parents, and we took Justin and the parents to Room 418.

10

11

Q. Now, did Cook arrive with both parents?

12

13

A. I thought he did, yes, yes, he did and we sent the father downstairs to admit him.

14

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Q. Had they brought him directly to the floor?

16

A. Yes.

17

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Q. And they hadn't gone to the Admitting Department at all then?

19

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A. No, they were told not to by Dr. Fowler, to bring Justin Cook right up to the floor.

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Q. So your recollection is that both parents arrived with the child at what, at about 10:30?



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A. Yes.

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Q. And you sent the father down
to the Admitting Department so the child might be
admitted to the Hospital?

5

A. Yes.

6

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Q. Did the mother stay on the
floor?

8

A. Yes.

9

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Q. And was the child taken with
his mother into Room 418?

11

A. Yes.

12

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Q. And did you and Miss Nelles
go into Room 418?

14

A. Yes, we did.

15

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Q. Miss Nelles was to admit the
child to the ward as I understand it?

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A. Yes.

18

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Q. Were any physicians present
at that time?

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A. Dr. Soulioti, she was either
there at the bedside when Justin Cook came in, or
was just coming, and Dr. Michael Schaffer came
shortly after that as well.

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24

25

Q. And so at about 10:30 we have
in addition to the people who had previously been



1

2

3

4

in Room 418, we have Justin Cook and his mother, you
and Miss Nelles, and either Dr. Soulioti then or very
shortly afterwards, and Dr. Schaffer I think you said?

5

A. Right.

6

Q. And the process of admitting
Cook went forward I take it?

7

A. Yes.

8

Q. What were you doing there?

9

A. I was just getting things
ready for Susan, a thermometer, getting the oxygen
ready. I brought her in some diapers and a flow
sheet so she could write down everything, a tape
measure to measure the baby's length.

13

14

Q. All of that information has to
be recorded at the time of the admission I take it?

A. Right.

15

17

Q. How long does the admission
process of a child to the ward usually take?

18

19

A. Including speaking to the
parents?

20

Q. Yes.

21

A. It could take upwards to about
an hour.

22

23

24

25

Q. And the purpose of speaking to
the parents as I understand it is to obtain what you



1

call a nursing history from them?

2

3

A. Right.

4

Q. And am I correct that on this

5

occasion the conversation with the parents to obtain
a nursing history did not take place?

6

A. Not that evening.

7

Q. And we will come to the reason

8

for that in a little while. Did Miss Nelles, having

9

done her thing, vital signs, measurements and all the

10

rest of that, then assist the physicians in doing

11

what they had to do?

12

A. I had, Dr. Nelles was still

13

out at the desk.

14

Q. Yes.

15

A. And in between getting the

16

things for Susan I had gone out to go back and

17

finish up my coffee. It was around 11 o'clock that

18

night that I came back and I said, "Your brother is

19

still at the desk, do you want to finish your

20

coffee, I can finish settling Justin Cook", and she

21

said "Fine" and had gone out and had a few more

22

minutes with her brother.

Q. Were the physicians still there

23

at that time?

24

A. Dr. Michael Schaffer was there,

25



1

2

and Dr. Soulioti, and they were examining the baby.

3

Q. And was that something for which

4

they did not need Miss Nelles' assistance, or did

5

you fill in for her?

6

A. I filled in, I just kept the

7

baby quiet.

8

Q. Was the mother still there at

that time?

9

A. Yes.

10

Q. So you say Miss Nelles was out

11

for a few minutes, apparently finishing her coffee,

12

as far as you understood anyway?

13

A. Yes.

14

Q. And that was at about 11

o'clock?

15

A. Right.

16

Q. What time did she return?

17

A. About 11:15, 11:20.

18

Q. At that stage were the same

19

people still in the room at Cook's bed?

20

A. Yes.

21

Q. That is to say the two

22

physicians, Soulioti and Schaffer, and yourself,

23

and the mother?

24

A. Dr. Soulioti had left the room

25



1

2

about 11:15, she was making notes at the back of the
nursing station.

3

4

Q. Yes.

5

6

7

A. And Michael Schaffer has just
sat down to talk to the parents, and I think he was
sitting down in Room 418 with them and talking to
them about Justin.

8

9

10

11

Q. At that point which is now I
take it about 11:15, 11:20, something of that sort,
at that point had the examination of Cook been
completed?

12

A. The initial examination, yes.

13

Q. What more was to come?

14

15

A. They were going to do an
ECG on the baby and they were going to take Justin
Cook over to the echo lab.

16

Q. The ECG had not yet been done?

17

18

A. We were getting ready to do
it as Dr. Schaffer was talking to the parents.

19

20

Q. And when Miss Nelles came back
to the room, you told us about 11:15, or 11:20, did
you stay in the room with her?

21

22

A. I think so, yes.

23

24

25

Q. Perhaps you can tell me how
it was that no nursing history was ever obtained from



1
2 the parents, that night anyway.

3 A. As Michael Schaffer had spoken
4 to the parents, he then took them outside to the
5 nursing desk and got them to sign a consent form,
6 and I thought it to be for a cardiac catheterization.

7 Q. Yes.

8 A. And Sue was in and out, just
9 picking up things for Justin, and she was doing little
10 things on the floor and I was in the room, I knew
11 that Mike Schaffer had had the parents outside. When
12 Michael Schaffer came in to do the ECG, the
13 electrocardiogram Sue had just followed him. I
14 said, "Are the parents still outside?" And Michael
15 said, "No, I sent them home". I said, "You're not
16 supposed to send them home". So I asked Sue did she
17 see them and she said they were walking down the hall,
18 they had left. So Susan and I had both spoken to
19 Mike Schaffer that we needed a nursing history from
20 the parents and he should not have sent them home at
21 that time.

22 Q. So you were unable to get your
23 history that night because the parents left?

24 A. Right.

25 Q. Now, while all this is going
on, we have forgotten, although I am sure and Miss



1
2 Nelles had not, Allana Miller there alone in Room
3 423, what was happening to her all this time? We
4 have now taken up I take it about an hour, from
5 10:30 when Cook arrived, indeed we have taken up
6 close to one hour and a quarter, from the time the
7 two of you went out for your coffee break until now
8 I would take it about 11:30?

9 A. Right.

10 Q. What was happening with Allana
11 Miller, did you know?

12 A. No, I didn't know.

13 Q. Did you have any -- did you
14 at any time hear her monitor alarm go off in the
15 period that you have just described to us?

16 A. No, I didn't.

17 Q. And there did not appear, I
18 take it, any cause for you to be concerned to go in to
19 see how she was doing?

20 A. No, there wasn't.

21 Q. And then what happened? We
22 are now at about 11:30 I take it and the parents have
23 been sent home, leaving you without a nursing history.

24 A. Right.

25 Q. And you are preparing for the
ECG?



10

1

2

A. Yes, the ECG was done.

3

Q. Was that a portable ECG unit

4

that was brought into the room?

5

A. Yes.

6

Q. Were you present when the ECG

was done?

7

A. I had hooked the leads up on

8

Justin.

9

Q. Yes.

10

A. I don't know, I can't recall

11

being there the whole time, I may have gone out.

12

Q. To the best of your information

13

and recollection was Miss Nelles there throughout
that time?

14

A. I can't recall.

15

Q. This was to be her patient I

16

take it?

17

A. Yes.

18

Q. Would it be reasonable to

19

expect that she would be there during that period
when the ECG was being done, assisting the physician?

20

A. If it was needed, yes.

21

Q. And how long did it take to do

22

the ECG?

23

A. Ten minutes, 15 minutes.

24

25



1

2

Q. So we are now at about 11:40,

3

11:45, something of that sort?

4

A. Right.

5

6

7

8

- - - - -

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EMT.jc
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Q. Now could we turn to the chart for a moment, please, and first to the flow sheet which is on page 36. We are now looking at Allana Miller's chart and the flow sheet. The vital signs for that shift begin on the bottom three lines of the previous page, and from those it appears, does it not, that on each occasion, 8 p.m., 9 p.m. and 10 p.m. Allana Miller had had a slow heart rate and apparently an irregular one. Do you understand the "I" to mean irregular?

11

A. Yes.

12

13

14

15

Q. And a heart rate so much slower than she had during the day although during the day on a number of occasions it had been relatively slow for a child of her age I take it?

16

A. Yes.

17

18

19

Q. All right. And then if we turn to page 36 it appears at 2300 there was a heart rate of 61, and here the letters "IR". Does that also mean irregular as you understand it?

20

A. Yes.

21

22

23

24

25

Q. And then a heart rate taken at 2345. We have heard from Miss Nelles, and is it your understanding that she recorded that heart rate at quarter to twelve?



D.2

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25

A. Yes.

Q. Do you know who did the heart
rate at 2300?

A. I did.

Q. I rather suspected that someone
other than Miss Nelles had because it seemed to be
her practice to use the single letter "I" to indicate
irregular.

A. Hm-hum.

Q. And you did the 11 p.m.?

A. Right.

Q. Heart rate. At 11 p.m. --

A. At the time I have there.

Q. Or within a few minutes either
side of 11 o'clock?

A. Right.

Q. Do you recall what had taken
you into Allana Miller's room at 11 p.m.?

A. I can't recall. I knew that
Allana Miller was on an hourly apex.

Q. All right.

A. And I may have gone in or Sue
may have asked me to check Allana.

Q. You can't recall if there was
anything like an alarm going off on a monitor that



D.3

1

2

caused you to go in and see how she was?

3

A. No.

4

5

6

7

Q. Now if you look at page 38 of the chart, Mrs. Trayner, you will see that something else is also recorded as having happened at 11 p.m., and that is that Miss Nelles signed for an administration of ampicillin?

8

A. Right.

9

10

11

12

Q. Were you aware that she had administered the ampicillin at 11 o'clock when you went to do the vital signs at about the same time or the apex at about the same time?

13

A. No.

14

15

16

Q. All right. Is it your information that Miss Nelles did indeed do the ampicillin that she signed for?

17

A. Yes.

18

Q. That is not one that you administered?

19

A. No.

20

21

Q. All right. Or to your knowledge anyone other than Miss Nelles?

22

A. No.

23

24

25

Q. So now we have got Allana Miller, she has had her apical rate recorded at 11 p.m. or



D.4

1

2

thereabouts by you?

3

A. Yes.

4

Q. She has received her ampicillin

5

at 11 o'clock or thereabouts from Miss Nelles?

6

A. Right.

7

Q. And Miss Nelles has apparently

8

recorded her apical rate at 11:45?

9

A. Right.

10

Q. And so far as we know, so far

11

as I understand your evidence, Allana Miller although

12

her heart rate is slow and irregular is not giving

13

any unusual cause for concern?

14

A. Right.

15

Q. Now let's go back to Cook in

16

Room 418. When we last left Cook - and it's

17

beginning to sound like an episode thing - the ECG

18

had just been completed I take it?

19

A. Right.

20

Q. And was he now to go to the echo

21

lab?

22

A. Right.

23

Q. Who took him?

24

A. Susan Nelles.

25

Q. Do you know what time she took him?

A. About a quarter to twelve.



D.5

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25

Q Did you see her take him down
the hall to the echo lab?

A I handed Justin Cook to her to
take over to the echo lab.

Q All right. Were you holding him
prior to his going off to the echo lab?

A They had just completed the ECG.

Q Yes.

A And I was taking off the leads
on four limbs and cleaning up the gook that is there.

Q Yes.

A And Susan had come in and said
they are ready for him over at the echo lab and I
said fine. We had put a nightie on him and I handed
Susan Justin Cook to take over.

Q All right. Was the ECG performed
with Cook in his crib or out of his crib?

A It was in his crib.

Q And you had taken him out of
the crib I take it then to remove the - what are they
called, the electrodes?

A Yes, but I wouldn't have taken
him out of the crib. He would have been laying on the
bed.

Q Okay. So you removed the



D.6

1

2

electrodes, cleaned up what you called the gook.

3

A. Yes.

4

Q. And then took him out of the
crib to hand him to Miss Nelles?

5

6

A. I was on one side of the crib
and she was on the other side.

7

Q. Yes.

8

9

A. So I had just finished cleaning
up his arms and his legs and I handed Justin over to
Susan.

10

11

12

Q. All right. Do you recall
whether she carried him down to the echo lab or
whether she took him in the crib?

13

14

15

16

17

A. To the best of my knowledge I
remember handing Justin over to Susan to take over.
I remember cleaning up his bedside area after he had
left and cleaning up the leads from the ECG,
straightening up the bed and his bedside table.

18

19

20

Q. All right. I take it from that
you would infer she carried him down to the echo lab
in her arms?

21

A. Yes.

22

23

24

25

Q. All right. Prior to leaving for
the echo lab with Justin Cook did Miss Nelles have
any conversation with you about her other patient



D.7

1

2

that night, that is to say Allana Miller?

3

A. Yes.

4

Q. What was that?

5

A. She had told me that she had just done Allana Miller's apex at about a quarter to. She had told me that there was an IV, an IV anti-biotic that was running through, and that it should be finished within a few minutes and if I could keep an ear for the buzzer or for the alarm. She also told me that she had to give another medication. She didn't know what medication it was or what time it was to be given, and if I could check that for her.

6

7

8

9

10

11

12

13

Q. All right. Did you subsequently hear the Ivac buzzer go on the IV in Allana Miller's room?

14

15

A. Yes.

16

17

18

Q. And that would indicate that the material in the buretrol had now passed through or essentially all passed through?

19

A. Right.

20

Q. What time was that?

21

THE COMMISSIONER: Is there a buzzer that indicates --

22

23

24

25

THE WITNESS: It is on an Ivac machine and when there is no fluid left in the buretrol or



D.8

1

2

the cylinder then a buzzer would go off to let you know.

3

4

THE COMMISSIONER: What's the problem?
Is it dangerous if the --

5

6

THE WITNESS: There is a safety valve in the cylinder that will fall down to not allow air into it, but there will be no fluid in and the machine will keep pumping into the patient so you have to put fluid into the cylinder.

8

10

THE COMMISSIONER: I take it it does some harm to the child?

11

12

THE WITNESS: It would, yes.

13

THE COMMISSIONER: If the machine continued to pump and there is no fluid?

14

15

THE WITNESS: Right.

16

MR. LAMEK: Q. And I take it when you hear the buzzer you know it is time now to go and flush the IV and then to restart a flow of material if that is the order?

17

18

19

A. Yes.

20

Q. And I am sorry, I think I asked you about what time you heard the buzzer sound but I don't recall either whether you answered or if you did what your answer was?

21

22

23

A. I thought it to be around

24

25



D.9

1

2

midnight when I was in the room.

3

Q. All right. And did you flush

4

the IV at that time?

5

A. Yes, I did.

6

Q. Now we have got what looks like

7

a floor plan of the floor and Room 423 is along

8

towards the left hand side of this floor plan, is it

9

not?

10

A. Right.

11

Q. That is a single room where

12

Allana Miller was?

13

A. Yes.

14

Q. Can you give me some indication,

15

please, where her bed was that night? She was the

16

only child in the room.

17

A. This is the corridor?

18

Q. This is the corridor, yes.

19

A. Her bed would be here, the head

20

by this wall.

21

Q. All right. You are telling me

22

that her bed was running parallel to the window?

23

A. Right.

24

Q. With the head against the right

25

hand wall as we are looking at the floor plan?

A. Yes.



D.10

1

2

Q. All right.

3

A. And the feet would be there.

4

Q. And on which side of the bed

5

was the IV pole?

6

A. She had a bedside table that

7

was beside the bed here.

8

Q. Between the bed and the door?

9

A. Right.

10

Q. Yes.

11

A. And an Ivac that was about here

12

beside the bedside table.

13

Q. All right. So between the door

14

and the bed were a bedside table and the IV pole and
the Ivac?

15

A. Right.

16

Q. All right.

17

A. And a monitor was there somewhere.

18

Q. And the monitor was on the same

19

side also?

20

A. Yes.

21

Q. Thank you. So I take it then in

22

going to the IV to flush it you were standing on the
door side of Allana Miller's bed?

23

A. Right.

24

Q. You were between the bed and the

25

door?



D.11

1

2

A. Right. Or beside the bed.

3

4

Q. You were beside the bed but on
the door side of the bed if I can put it that way?

5

A. Okay. Right.

6

Q. Not on the window side of the bed?

7

A. No.

8

9

10

Q. In the position in which you were
standing if someone were standing in the doorway of
Room 423 would they see your back or your side or
what would they see when you were working at the IV?

11

A. Probably my side.

12

Q. Your left side?

13

A. Yes.

14

15

16

Q. Thank you. While you were
flushing the IV as you have told me, and I will come
back to the detail of that in a moment, were you aware
of anybody standing in the doorway?

17

A. No.

18

19

Q. Can you tell me how you flushed
Allana Miller's IV at about midnight?

20

21

22

23

24

25

A. I released some fluid from the
IV bag, from the little clamp that was up there and
filled up the buretrol to the amount of fluid that I
had wanted; turned off the clamp and I may have
increased the IV flow, I am not sure.



D.12

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25

Q. Now, Mrs. Trayner, as you were doing that, you were doing something that the Reporter can't record. Do I put it fairly that as you have described what you did you were holding your right hand up approximately level with the top of your head to indicate with that hand you were releasing fluid from the IV bag?

A. Right.

Q. And at the same time you were holding your left hand out at about chest height, and I take it you were what, holding the buretrol?

A. Holding the buretrol so that I could see the numbers.

Q. All right. And if I may say so you made those gestures in the way that one would make them if one were accustomed to doing them over and over again. Is that the way you normally flush an IV?

A. Right.

Q. Have you ever to your recollection flushed an IV with the use of a syringe?

A. No, not for the purpose of an IV medication, no.

Q. All right. And you are clear in your recollection that you did not do so on the night of March 20 to 21 at midnight?



D.13

1

2

A. That's right.

3

4

5

6

7

Q. Your recollection is clear that on that occasion with the gestures that you have just demonstrated for us you released IV fluid from the bag above the buretrol, that the fluid flowed into the buretrol which I take it you were steadying with your left hand?

8

A. Right.

9

10

Q. Do you recall how much fluid you released?

11

A. No. Today I can't, no.

12

13

Q. All right. What would be an amount that you would normally use to flush an IV line?

14

15

A. As long as a child wasn't on a fluid restriction. There could be 20, 30, 40 cc's.

16

Q. All right. You might use less I take it?

17

18

19

A. If it was on a - you would have to use at least 10 cc's because that is the amount from the tubing to the child.

20

21

Q. That makes sense. So you would need at least 10 cc's of IV fluid going through the line effectively to flush it?

22

23

24

25

A. Right.

Q. Do you recall, Mrs. Trayner,



D.14

1

2

whether on that occasion, that is to say at midnight,
March 20 to 21, when you were flushing that IV line,
whether you had a syringe with you?

4

5

A. No.

6

Q. Can you think of any reason --

7

THE COMMISSIONER: Sorry, that answer
was no, I don't remember or no, I didn't have one?

8

THE WITNESS: I can't recall having one.

9

10

MR. LAMEK: Q. All right. Can you
think of any reason for your having had a syringe
with you at the time of flushing an IV line?

11

12

A. No.

13

14

Q. And indeed if your hands were
in the position that you demonstrated in doing the
things that you have told us about, I would take it
that a syringe would be an encumbrance to you?

15

16

A. Right.

17

18

Q. It would be an awkward thing to
hold while you were performing the operation that you
have described to us, would it not?

19

20

A. Yes.

21

22

Q. Do you recall any occasion on the
night of March 20-21 when you were at or near the IV
line of Allana Miller when you did have a syringe with
you?

23

24

25



D.15

1

2

A. Yes.

3

Q. When was that?

4

A. 1 o'clock.

5

Q. We will come to that later, but

6

can you just tell us at the moment what you were doing?

7

A. I was giving an IV medication.

8

Q. Is that the gentamicin?

9

A. Yes.

10

11

12

13

14

15

16

17

18

19

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21

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23

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BMcrc 3

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Q. Was there any other occasion

on the night of March 20 to 21 that you can now recall when you were at or near the IV line of Allana Miller with a syringe other than at about one o'clock when you administered gentamicin?

A. No.

Q. As you are aware, Mrs. Bell

has given evidence that at some point that night, she said initially at about midnight, and fairly subsequently she said she couldn't be absolutely certain that it was midnight, she saw you at the IV of Allana Miller with a syringe. If I understand your evidence, do I have it correctly that if she did that, it could only have been at about one o'clock when you were administering gentamicin?

A. Right.

Q. And it could not have been at midnight when you were flushing the IV line?

A. No.

Q. We will come back to that in the context then of the gentamicin administration.

A. Okay.

Q. Could we backtrack for just a moment, Mrs. Trayner, to the time that Miss Nelles went out to complete that coffee break with her



1
E2 2 brother and Dr. Runge.
3 A. Yes.
4 Q. I thought you told me a few
5 minutes ago that that was about eleven o'clock.
6 A. Yes.
7 Q. Could it have been as late
8 as 11:15, 11:20 that she went out?
9 A. It could have been, yes.
10 Q. All right. And if it were
11 then the fifteen or twenty minutes that you have
12 suggested she was away, it would take her to 11:30
13 or to 11:40?
14 A. Right.
15 Q. Yes. Do you recall on an
16 earlier occasion, and I am referring now to a state-
17 ment given by you on April 21, 1981 saying that it
18 was about 11:20 that she went off for her break?
19 A. It could have been.
20 Q. All right. If indeed you
21 said at that time that she went off to have that
22 coffee at about 11:20, I take it your evidence today
23 would not contradict that, essentially?
24 A. Right.
25 Q. Some time around 11:15, 11:20?
A. Right.



1

E3

2

Q. Okay. What time did Miss

3

Nelles come back from the echo lab with Justin Cook?

4

A. I thought it was just shortly

5

after 12:15, 12:20 because I remember her asking me

6

if anyone had taken her vital signs for her on her
other patients.

7

Q. All right.

8

A. So, it had to be shortly

9

after her midnight vital signs, so about 12:15, 12:20.

10

Q. When you were in Allana

11

Miller's room at about midnight flushing that IV, how
was the child?

12

A. She was sleeping and I did

13

her vital signs at that time and there wasn't anything

14

that was of a great concern to me.

15

THE COMMISSIONER: I take it that is

16

your writing for the vital signs at twelve o'clock?

17

THE WITNESS: Right, yes.

18

MR. LAMEK: Q. The 2400 vital

19

signs on page 36 are yours?

20

A. Yes.

21

Q. I notice on that occasion

22

you just used an 'i' to indicate 'irregular', I take
it?

23

A. Yes.

24

25



1

E4 2

Q. All right. Do you sometimes
use 'i' and sometimes 'ir' for that purpose?

3

4

A. Yes, I guess I do. I never
noticed.

5

6

Q. At eleven o'clock you apparently
said, 'ir' for 'irregular', at midnight it was 'i'
but the meaning is the same?

7

8

A. Yes.

9

10

Q. Just looking at that page 36
for a moment, Mrs. Trayner, we know then that the
2300 apical rate was the one that you recorded.

11

12

A. Yes.

13

Q. 2345 was Miss Nelles.

14

A. Right.

15

Q. 2400 was yours.

16

A. Yes.

17

Q. What about 0100?

18

A. That looks like my writing
as well.

19

Q. That's your writing as well,
is it?

20

A. Yes.

21

Q. All right. And then there is
a blood pressure noted with no time on the very next
line. Is that your writing?

22

23

24

25



1
E5 2 A. No, it's not.
3 Q. Do you recognize that hand-
4 writing?
5 A. Yes.
6 Q. Whose is it?
7 A. Mrs. Christie's.
8 Q. All right. Do you know in
9 fact whether Mrs. Christie did take the blood pressure
10 of Allana Miller some time after one o'clock?
11 A. I can remember Mrs. Christie
12 being in the room when the alarm had gone off.
13 Q. Yes.
14 A. I can remember me standing
15 at the desk, at the nursing desk, and Mrs. Christie
16 had come out and I had asked her what the problem
17 was and she said that the heart rate was - I can't
18 remember what the heart rate was but she said, I've
19 done the blood pressure, and she told me what it was.
20 Q. All right. Do you recall
21 at about midnight that night having any conversation
22 anywhere with Bertha Bell?
23 A. No. We had a conversation
24 earlier, that would have been at 10:15 when we took
25 our break.
Q. Yes. Is that the one you have



E6

1

2

told me about when Drs. Nelles and Runge were there?

3

A. Right.

4

Q. All right. But other than that do you recall talking to Bertha Bell again that night up to around midnight?

5

6

A. No.

7

8

Q. All right. So, we have now got Allana Miller at least through until midnight still with the slow heart rate and it is still irregular but there is no apparent change in the condition, is that fair?

9

10

11

A. Right.

12

13

14

15

Q. Right. And that some time about 12:15, 12:20, according to your recollection, we have Miss Nelles back from the echo lab with Justin Cook?

16

17

18

A. Right.

Q. All right. Where did Miss Nelles go when she came back from the echo lab?

19

20

21

22

23

24

25

A. Into 418.

Q. All right. Did she stay in Room 418?

A. I can remember her putting Justin Cook into oxygen.

Q. Yes.



1

E7

2

A. And I can remember her getting

3

a bottle to feed him.

4

Q. To the best of your knowledge,

5

Mrs. Trayner, from the time that Susan Nelles took

6

Justin Cook to the echo lab at or shortly after

7

11:45, when was she next in Room 423?

8

A. When Allana Miller got into

difficulty.

9

Q. And that was some time after

10

two o'clock in the morning?

11

A. Yes.

12

Q. To your knowledge she was

13

not present in Room 423 between about a quarter to

14

twelve and some time after two in the morning?

15

A. Right.

16

Q. All right. We know as far as

17

your movements are concerned what had happened until

18

midnight. When were you next in Allana Miller's

19

room?

20

A. I went in just shortly before

one, one o'clock, and took Allana's heart rate and

21

gave the medication.

22

Q. All right. And that was the

gentamicin?

23

THE COMMISSIONER: I'm sorry, is that

24

25



1
E8 2 the heart rate?
3 MR. LAMEK: That's the 62 recorded
4 at 0100.
5 A. Yes.
6 Q. All right. Now, other than
7 the need first to take the hourly apex rate and
8 second to give the gentamicin which was due at one
9 o'clock, was there anything in Allana Miller's
10 condition that caused you to go in at about that time?
11 Was there any alarm from the monitor? Was there any
12 sign of distress or anything of that sort?
13 A. No.
14 Q. All right. Well, let's get
15 to that gentamicin. I think you told us that before
16 she took Cook off to the echo lab Miss Nelles said
17 she had another medication to give and she wasn't
18 too sure when it was due. Was that your evidence?
19 A. Yes.
20 THE COMMISSIONER: I thought she
21 said she didn't know what it was or when, is that
22 right?
23 MR. LAMEK: Okay. But she knew she
24 had another medication to give.
25 A. Yes.
Q. Did she at any time prior to



1
E9 2 your going into Room 423 with the gentamicin ask you
3 to administer that medication for her?
4 A. She didn't ask me that at
5 that time.
6 Q. All right. Did she subse-
7 quently?
8 A. I don't know.
9 Q. How did it come about that
10 you did administer the gentamicin at or about one
11 o'clock?
12 A. I had the medication ticket
13 that I was taking all the tickets away from the
14 medication room to check all the orders and I knew
15 that --
16 Q. Forgive me, let me interrupt
17 you for a moment, if I may. Is that part of your
18 normal duties as team leader --
19 A. Yes.
20 Q. -- to check the medication
21 tickets from time to time during the course of a
22 shift?
23 A. It's done every night, yes.
24 Q. Okay. Thank you. So, that's
25 what you were doing? About what time was that?
A. I think I may have taken them



1
E10 2 down about 12:30 and was just getting organized to
3 get the nightly work done.

4 Q. Were you doing that at the
5 desk at the nursing station?

6 A. I would have, yes.

7 Q. All right. I'm sorry, I
8 interrupted you. Would you go on, please.

9 A. And I knew in the little slot
10 there was a one o'clock ticket and it was Allana
11 Miller's gentamicin. I had the ticket, Sue was I
12 can remember being busy trying to settle Justin,
13 feeding him and he was very irritable and he was
14 crying. So, I don't know if I told her that gent.
15 was due, if I went in and said the gentamicin is
16 due and said I will give it for you if you want,
17 I don't know.

18 Q. All right. But you did in
19 fact administer that medication at about one o'clock
20 to Allana Miller?

21 A. Yes.

22 Q. Now, before doing it, did you
23 check at all with Miss Nelles? Did you check the
24 medication with Miss Nelles?

25 A. Yes.

Q. What did you do?



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A. I brought in the medication ticket, I brought in a syringe and I brought in the vial of gentamicin.

Q. Let me ask first, why did you do that?

A. I wanted to impress upon Susan that the drug that she knew she had to give but didn't know what it was and when, that this was the gentamicin that I have for one o'clock for Allana Miller and I'll give it for you now. I was afraid that since I had all the medication tickets out at my desk, Sue could have looked at her little crib sheets that we make all the medication treatments out and had thought, well, oh, yes, I have the gentamcin to give to Allana Miller and may have gone and given it. I just wanted to impress upon her that this is the drug, I'm going, that there wouldn't be any confusion as to whether it was given or not given.

Q. Why did you not merely tell her, I am going to do it or I have done it, to avoid any possible duplication of the administration? Why did you take the drug in to her to show her?

A. I guess if she saw the drug then it would make more sense to her that, yes, the drug was given and, like, she has actually seen me with



1
E12 2 it and if I told her, with her being that busy that
3 night, it may have slipped her mind.

4 Q. All right. Now, you say you
5 went into the room, you had the medication ticket,
6 you had a syringe and you had the vial?

7 A. Right.

8 Q. Do you recall whether you had
9 already drawn up the medication prior to going into
10 Room 418 to show Miss Nelles?

11 A. No, I can't remember.

12 Q. All right. I can tell you,
13 Mrs. Trayner, that Miss Nelles' evidence - and it is
14 found, sir, at Volume 124, page 8250 - when you went
15 into 418, the medication had already been drawn up into
16 the syringe and you brought with you a loaded syringe
17 and the empty vial of gentamicin. You have no
18 recollection of when or where you drew up the genta-
19 micin?

20 A. No.

21 Q. If Miss Nelles' evidence be
22 correct, can you tell me what was the point of showing
23 her an empty vial?

24 A. Just to show her that I was
25 giving gentamicin. I wasn't sure if Allana Miller had
any other medications due that night, I hadn't gone



1
E13 2 through all the tickets.

3 Q. Yes.

4 A. And she may have had another
5 antibiotic needed or another medication that was due.
6 I was giving this one o'clock gentamicin and I just
7 wanted to impress that this was what I was giving at
8 this time. Now, if there was another drug to be given
9 at two or three, then Sue would know, well, she would
have to give it.

10 Q. Well, are you telling me then
11 that you did not take the vial in for the purpose of
12 showing her that you were indeed giving gentamicin
13 but rather to impress upon her that she didn't have
14 to worry about the gentamicin administration. Do you
see the distinction that I am drawing?

15 A. No, I wanted to let her know
16 about the gentamicin. Gentamicin comes in two
17 different strengths.

18 Q. Yes.

19 A. It comes in 20 mg. per ml.
20 and then the next one is the adult one, which is 80 mg.,
21 and I just wanted to be double sure that she saw that
22 there was the 20 mg., and I got the dose and that's
what we were giving.

23 Q. Okay. Believe me, I am not
24
25



1
El4 2 suggesting anything inappropriate, but does it not
3 occur to you, Mrs. Trayner, that all you were really
4 doing was showing her an empty vial that had apparently
5 at some time contained gentamicin in the strength
6 called for on the order?

7 A. You see, I can't recall if
8 I drew it up at the bedside with Sue, the gentamicin,
9 or I drew it up in the medications room.

10 Q. You have no recollection, but
11 she did. If her recollection be correct, it is fair,
12 is it not, that she could have no absolute guarantee
13 of what was in the syringe?

14 A. Okay, yes.

15 Q. She had no reason to doubt you
16 of course.

17 A. Right.

18 Q. But she couldn't know by you
19 showing her the empty vial, could she?

20 A. If it was empty, yes.

21 Q. Yes. Did you have any other
22 reason for taking that medication into Room 418 to
23 show Miss Nelles or was it just so she would know that
24 she didn't have to worry about that medication, it was
25 now going to be given by you and there wouldn't be a
duplication?



1
E15 2 A. That was the main reason.
3 Q. Was there any other reason?
4 A. We also heard about the
5 Pacsai inquest that night.
6 Q. Yes.
7 A. And although it wasn't a big
8 thing, I just wanted to let her know that I was going
9 ahead to give this medication.
10
11
12
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Q. And that is what you did?

3

A. Yes.

4

Q. What was the - can we look at the
med sheet at page 38 of the chart; the order apparently
called for gentamicin, 10 milligrams IV. Can you tell
me what volume of material 10 milligrams of gentamicin
would fill?

8

A. Gentamicin has to be diluted
1 milligram per cc, so it would have to be at least
10 cc's.

10

11

Q. That is in the IV?

12

A. In the buretrol.

13

Q. In the buretrol?

14

A. Yes.

15

Q. But when you draw that up into
a syringe what volume of material do you have for
10 milligrams?

16

17

A. I would have had .5.

18

Q. .5 of a cc?

19

A. Yes.

20

Q. Do you recall what size syringe
you used when you drew up the gentamicin?

21

A. No, I don't.

22

Q. To draw up half a cubic centimetre
of a medication, what size would you normally use?

23

24

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F.2

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A. We would have used tuberculin syringes, or we could have used 3 cc syringes.

Q. The tuberculin syringe is the 1 cc size?

A. Yes.

Q. Is it fair to say that for half a cubic centimetre you are more likely to use a 1 cc than a 3 cc size, is that fair? 3 cc is six times bigger than you needed.

A. Yes, but the tuberculin syringes were basically used for digoxin.

Q. Yes.

A. For drawing that up so that we could, we would be able to squirt the medication into the baby's mouth.

Q. I am sorry, I am not quite sure how that bears on the question that I asked you?

A. We would use more of the tuberculin syringes for digoxin.

Q. Yes.

A. If we had other - more, or an abundance of TB syringes we would have used a tuberculin syringe at night.

Q. I am sorry, let me understand you. You say the tuberculin syringe is a 1 cc size, that



F.3

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2

was the one that you normally used to administer the
oral digoxin?

3

4

A. Right.

5

6

Q. Because that is drawn up in very
small volumes, is it not?

7

A. Right.

8

Q. And the 1 cc is the smallest
syringe you had on the floor, wasn't it?

9

A. Right.

10

11

Q. Therefore I take it the 1 cc
syringe was frequently used on the cardiology floor
for digoxin?

12

13

A. Yes.

14

Q. If for nothing else?

15

A. Right.

16

Q. Was that the most frequently used
sized syringe on the floor?

17

A. No, 3 cc's came in a close second.

18

19

Q. And I take it 3 cc's would be
used for generally speaking, and if you had a choice,
they would be used for obviously material that
occupied more than 1 cc of syringe space, you can't
get more than 1 cc into a tuberculin syringe?

20

21

22

A. Right.

23

24

Q. I take it generally you use the

25



F.4

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smallest size available that will accommodate the material that you are going to use?

A. Yes.

Q. That you are going to administer?

A. Yes.

Q. And therefore, may I take it that normally you would expect to draw up a half cc of gentamicin into a 1 cc syringe, is that fair, normally that is what you would expect to do?

A. Yes.

Q. Do you have any reason for thinking that is not what you did on the night of March 20th to 21?

A. No, unless there was a shortage of the 1 cc syringes.

Q. Do you have any recollection of there having been a shortage?

A. No, not that night. I do recall other nights where we were short on TB syringes and we had to use one syringe to draw up all the digoxin.

Q. Again I have to be clear as to your answer, Mrs. Trayner. Are you telling me you don't recall whether you were short that night; or you recall that you were not short that night of the 1 cc size?



F.5

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A. I don't recall if we were short
that night.

Q. You don't recall whether you
were short or not that night?

A. Right.

Q. Now, let me be absolutely plain
about it, Mrs. Trayner, you recall giving evidence at
the preliminary hearing?

A. Yes.

Q. And in Volume 4, Mr. Commissioner,
at page 693, you were asked by Mr. McGee, at line 25
in respect of the gentamicin administration:

"What size was that syringe that you
used to do that?"

And you said:

"I think it was a 3 cc syringe."

It doesn't appear that Mr. McGee
asked you anything like the series of questions that
I have asked you about the size. Do you now recall
any basis for your thought then that what you used
was a 3 cc syringe? I don't ask you to speculate, do
you now recall why you may have thought then, that is
to say at the preliminary hearing, that the syringe
you used was a 3 cc syringe?

A. I may not have known at the time



F.6

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2

when Mr. McGee asked me how much gentamicin was to be given.

3

4

5

6

Q In other words, had the dose been a bigger dose you might have had to use a 3 cc syringe?

7

8

9

A Yes.

10

11

12

13

14

15

16

A No.

17

18

19

20

21

22

23

24

25

Q But certainly you did say back in the spring of 1982 that you thought it was a 3 cc syringe. You cannot now tell me whether to your recollection there was a shortage of the 1 cc size that night, the size you would normally have used for this sized dose?

A Right.

Q When you were administering that medication at 1 o'clock, or thereabouts, were you aware of anybody in the doorway of the room, or in the entrance way of the room at all?

A No.

Q Were you in the same position to administer the gentamicin as you have described for the flushing of the IV?



F.7

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A. Standing?

3

Q. Yes.

4

A. Yes, but my hand would not have

5

been up at the IV.

6

Q. I take it on this occasion you

7

would have had one hand on the buretrol?

8

A. Yes.

9

Q. And the other with the syringe

10

at the medication port at the top of the buretrol?

A. Right.

11

Q. Standing in the position that you

12

now recall, can you tell me whether your hands would

13

have been visible to someone in the doorway?

14

A. Yes, they would have been.

15

Q. And on that occasion you were

16

using a syringe, the size you cannot now recall, to
inject gentamicin into the buretrol?

17

A. Right.

18

Q. Which I take it is the normal

19

way of administering gentamicin?

20

A. Yes.

21

MR. LAMEK: Mr. Commissioner, is this
a convenient time to break?

22

THE COMMISSIONER: Yes, we will take

23

20 minutes.

24

--- Short recess

25



F.8

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2

--- Upon resuming:

3

THE COMMISSIONER: Yes, Mr. Lamek.

4

MR. LAMEK: Thank you, Mr. Commissioner.

5

Q Mrs. Trayner, just going back to
a couple of things where we have already dealt with,
6 and going back briefly. At or about 11 o'clock we
7 know that two things happened with respect to Allana
8 Miller; one you took and recorded the apical rate?

9

A. Right.

10

Q And two, Miss Nelles administered
11 the ampicillin?

12

A. Right.

13

Q And I take it you were not there
14 at the same time doing those things?

14

A. No.

15

Q Have you any idea which came
16 first?

17

A. No, but I would assume that I
18 had taken the apical rate first because Sue knew she
19 was on an hourly apex so when she was in giving the
20 gentamicin she would have taken it, or the ampicillin.

20

21

Q That makes sense. So the
22 probability is that you were there first, took the
23 apex and recorded it, and because she was on an hourly
24 apical rate would that sheet be kept in the room by
her bedside?

25



F.9

1

2

A. Yes.

3

Q. And therefore if Miss Nelles

4

followed you later into that room, and you having

5

then left, to do the ampicillin, she would see from

6

the sheet that the 11 o'clock apex had already been
done?

7

A. Right.

8

Q. Were you aware when you went

9

in to do the 11 o'clock apex that Allana Miller had

10

a medication due at 11?

11

A. No.

12

Q. And you had not looked at the

13

medication ticket prior to that time to see what the
child needed?

14

A. No, I had not.

15

Q. With respect to the administration

16

of gentamicin at about 1 o'clock, were you alone with

17

the child in that room when you were administering

18

the gentamicin?

19

A. Yes.

20

Q. There was no one else there at

21

that time?

22

A. Not that I can recall, no.

23

Q. I have already asked you whether

24

you recall seeing anyone in the doorway and you said

25



F.10

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no, you did not; and there was nobody in the room

3

with you as you can now recall it?

4

A. No.

5

Q. Do you recall whether you had

6

any conversation anywhere on the floor with Bertha Bell
at or about 1 o'clock that night?

7

A. No.

8

Q. You say, no, you can't recall;

9

or no, you didn't?

10

A. No, I can't recall.

11

Q. And just one thing on the

12

geography of the room if you can help me. You told

13

me that the bed was parallel to the window and towards
the window end of the room I take it?

14

A. Yes.

15

Q. With the head on the wall to

16

the right as we look at this chart?

17

A. Yes.

18

Q. On the door side of the bed you

19

have told me there was a night stand and the IV setup?

20

A. Yes.

21

Q. Was the IV a sort of normal IV

22

pole?

A. Yes.

23

Q. With a bag at the top and the

24

25



F.11

1

2

buretrol and so on?

3

A. It would be on the Ivac, so there would be a machine in the middle of the pole.

4

5

Q. And working from window to door now, we have got the bed and then what is next, the IV or the night stand, or the bedside stand?

6

7

A. Well, it would be the night stand beside her.

8

9

Q. Yes.

10

A. And the IV pole would be in the centre of the bedside table and right down the middle of it.

12

13

Q. And behind it, against the wall?

14

A. No, in front of it.

15

16

Q. All right. So we have got the bed, and then next to the bed a night stand, and sort of in front of the night stand then the IV pole?

17

18

A. Right.

19

Q. Now we are at 1 o'clock in the morning, and as you have told us to the best of your knowledge Miss Nelles has not seen the child now since quarter to twelve, or thereabouts?

20

21

A. To the best of my knowledge.

22

23

Q. Let me be sure, I may not have asked you this very clearly. Was it at about quarter

24

25



F.12

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2

to twelve, or a few minutes thereafter that Miss

3

Nelles had taken Cook down to the echo lab?

4

A. Yes.

5

Q. As far as you know, by 1 o'clock
she still had not been in to see Allana Miller again?

6

A. To the best of my knowledge.

7

Q. And by 1 o'clock do I take it
that Allana Miller had not yet shown any signs of
change in her condition?

9

10

A. No.

11

Q. After you had administered the
gentamicin at about 1 o'clock in the morning, when
were you next in Room 423?

12

13

A. It was just shortly after
1 o'clock then.

14

15

Q. And how did that come about?

16

A. Allana's monitor kept buzzing.

17

Q. Kept buzzing?

18

A. Well it buzzed at that time, then
a few minutes later it would buzz again.

19

20

Q. And did you go in the first time
it buzzed?

21

A. I think so, yes.

22

Q. Did you go in each time it buzzed?

23

A. No.

24

25



F.13

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3

Q. Did somebody go each time the
alarm buzzed?

4

A. Yes.

5

6

Q. And was that the first occasion
that you can recall that night when the alarm on the
monitor had sounded, a little after 1 o'clock?

7

A. Yes.

8

9

Q. You think you responded to the
first alarm call from the monitor?

10

A. Yes.

11

Q. What did you find?

12

A. I can't recall what I found, I
took her heart rate.

13

14

Q. Yes.

15

A. And that would have been it, I
think the chart --

16

17

18

19

Q. Did you record it? Let's look
at page 36 first of all, certainly on the flow sheet
there doesn't seem to be anything recorded between
1 o'clock and 1:45?

20

21

22

A. Hm-mm. I could have just
listened to her heart rate when the monitor had gone
off, you may not necessarily have to write it down
into the flow sheet.

23

24

25

Q. Now we know both from the flow



F.14

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sheet on page 36 and from the nursing note on page 42 that at approximately 1:45 the heart rate dropped about 54 and was very irregular.

5

A. Hm- mm.

6

Q. Is the 1:45 entry on the flow sheet in your writing?

7

A. Yes.

8

9

10

11

Q. And is it your recollection that at some time between 1 o'clock and 1:45 you had been in the room in response to the alarm on the monitor going off?

12

A. Yes.

13

14

Q. Do you recall how frequently the monitor alarm sounded between 1 and 1:45?

15

A. I would estimate about three times, three or four times.

16

17

Q. On the 1:45 occasion was that also an occasion when the monitor alarm went off?

18

A. Yes.

19

20

Q. And was that then the fourth or fifth time that that had occurred since 1 o'clock?

21

A. I think so, yes.

22

23

24

25

Q. To how many of those earlier alarms, the three or four that occurred before 1:45, to how many of those had you responded, how many times had you gone into the room?



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A. I had gone in the first time
it had sounded.

Q. Yes.

A. And I can't recall if I had
gone in after that. I was on my way to the room
a couple of times, but Janet Brownless or Mrs.
Christie had beat me there to it.

Q. All right. You have told us
that on one occasion Mrs. Christie had answered and
had taken the blood pressure and recorded it and you
talked to her about that at the nursing station?

A. Yes.

Q. Now on these three or four
occasions whatever it may have been between shortly
after 1 o'clock and 1:45 did you at any time talk to
Susan Nelles in 418?

A. Yes.

Q. About Allana Miller's alarm
going off?

A. Yes, I had.

Q. What the problems were?

A. Yes.

Q. Do you remember whether you
spoke to her on more than one occasion in that time
period? One or more than one time?



1

2

A. Well, I think I told her -

3

I had given her the vital signs for midnight I know,
and I had told her at 1 o'clock shortly after I had re-
turned when the alarm had gone off again that Allana's
apex was either irregular or it was slower than before.

6

Q. Yes.

7

A. I can't recall how many times

8

I told her. I kept her up to date with the baby.

9

THE COMMISSIONER: Sorry, you had what?

10

THE WITNESS: Kept her up to date.

11

MR. LAMEK: Q. Did she appear to be

12

concerned that the irregularity and the rate was now
at a point where the alarm on the monitor was
sounding?

14

A. She said it had been low before,

15

that she hadn't seen the apex before that or she

16

hadn't listened to the apex, so I told her that I

17

will ask Dr. Soulioti who was still at the desk to

18

have a look at her or listen to her heart rate

19

before she left for the night.

20

Q. And did you do that?

21

A. Yes.

22

Q. Did Dr. Soulioti take a look

23

at the child?

24

A. Not at that time, no, she

25



1
2 didn't.

3 Q. All right. Did she give any
4 reason for not complying with your request?

5 A. It wasn't an urgent request.
6 I had just asked her to check in on Allana before
7 she had left the floor.

8 Q. All right.

9 A. And she would do that as soon
10 as she had finished up writing Justin Cook's chart.

11 Q. All right. And before she
12 left the floor did she look at the child?

13 A. Yes.

14 Q. And did she write any orders,
15 give you any instructions with respect to the child?

16 A. I thought she had written an
17 order that night when I had spoken to her to hold
18 digoxin for the morning.

19 Q. The orders are found
20 beginning on page 28. 8:30 in the evening apparently
21 Dr. Kantak had ordered a dig. level for the following
22 morning and had also ordered that dig. be held. Do
23 you see that on page 29?

24 A. Yes. Do you have writing on
25 page 30?

Q. I think you will find those



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G4

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orders - they are very poorly reproduced - at page 43. Certainly there is an order of Dr. Soulioti at 0230 showing 'hold digoxin'.

A. Right.

Q. And I confess I am a little puzzled as to why that is there in light of the 8:30 order of Kantak to hold the digoxin. But it is your recollection that order was written anyway about 2:30 in the morning after Dr. Soulioti had taken a look at the child?

A. Dr. Kantak I think wrote his order, though, on the 19th.

Q. I'm sure you are right. You are absolutely right. That was the day before and there was a dig. level that morning. So Dr. Soulioti took a look at the child at 2:30 in the morning and wrote an order to hold digoxin.

A. I don't believe she had seen the baby at that time. I told her what Allana's heart rate was, and that it was in the 50s --

Q. Yes.

A. -- and it was irregular. And that was her order then, to hold the digoxin and they would probably do a dig. level in the morning --

Q. All right.



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A. -- and that she would check the baby as soon as she had finished her order.

Q. On that subject, Mrs. Trayner, if you look at page 38, you will see that Miss Nelles signed for the digoxin dose at 9:00 p.m. on the 20th, did she not?

A. That's correct.

Q. Do you recall any discussion with her prior to her administering that dose?

A. No.

Q. All right. Now we have had then Allana Miller's monitor alarm going off three or four times between one o'clock and 1:45, and that at least was a new departure that night, was it not?

A. Yes.

Q. Was it a development that caused you concern?

A. It was a concern because her heart rate was a little lower --

Q. Yes.

A. -- than I had remembered it to be when I had taken the signs at eleven and at midnight.

Q. Yes.

A. In looking over the flow



1
G6 2 sheets in the room, she hadn't been as low as 50
3 I don't think.

4 Q. All right. When you spoke to
5 Dr. Soulioti I think you told me a couple of minutes
6 ago it wasn't an emergency call - go and look at that
7 child right now?

8 A. No, it wasn't.

9 Q. And I take it from that,
10 although you had a concern about the heart rate which
11 was now dropping lower than it had been, you didn't
12 regard it as an emergency situation?

13 A. No.

14 Q. Just for them to keep an eye
15 on it, I take it?

16 A. Yes, and just for Soulioti
17 to look at the baby before she had left.

18 Q. Now in the periods between
19 the alarm going off, as it did between 1:00 and 1:45,
20 was the child left alone?

21 A. Was the child left alone?

22 Q. Yes.

23 A. Yes.

24 Q. Okay. You were relying I take
25 it on the monitor reasonably to alert you if there was
another incident of the heart rate dropping?



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A. Yes.

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Q. So you did not perceive it again to be so urgent a situation that someone should have been there looking at the child all the time and keep that close an eye on her?

A. No.

Q. Then at 1:45, as we know, the heart rate is recorded by you, and at that stage it is 54. Do you think that to have been the occasion when you asked Dr. Soulioti to take a look at the child?

A. It could have been, yes.

Q. Could you carry us through then the next little while on Allana Miller's progress and course?

A. I don't -- I can't remember the times, but I can give you what I can remember.

Q. Good. Thank you.

A. I can remember that the alarm went off another time. This is after we spoke to Dr. Soulioti, and at this time Bertha was on her way into the room to check the alarm. And I had followed Bertha in. She was -- Allana was kind of gagging and choking a little bit

Q. Yes.



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A. And we had sat her up in the bed. She had vomited a small amount, which we thought was the apple juice that had been given earlier. Bertha had suggested that we suction her maybe, but when we went for the suction catheters, there was none in the little basket that we keep them in. I can also remember --

Q. Sorry, where is that basket kept?

A. It would be on the wall to the window.

Q. In the room?

A. Yes.

Q. Okay. Yes?

A. And I can recall it was around the two o'clock time that the buzzer for the Ivac had gone off.

Q. Signalling the gentamicin had gone through, I take it?

A. Yes.

Q. Yes.

A. I can remember Bertha going out to get suction catheters and I can remember her telling me that she told Susan, Susan Nelles, about Allana.



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G9

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Q. Yes.

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A. I can remember Bertha coming back and we put the suction catheters there, and Allana seemed to be a little better that she didn't require the suctioning, and we put her back down in bed and put some oxygen on her.

Q. All right. You say you can't tell us just what time that was. Can you tell us approximately when that was?

A. It would have to be around two o'clock. Now whether it was before two or just shortly after two, I can't be sure.

Q. All right. Did you then leave the child again?

A. No, I don't think we had left her. I had settled her in the oxygen and I was waiting to see if the oxygen would help and if she would settle down a bit.

Q. All right. Now you say Mrs. Bell told you that she told Susan Nelles, who I take it was in Room 418?

A. Yes.

Q. ...About this incident when she went out to look for the suction catheters.

A. Yes.



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Q. Did Miss Nelles come into
the room at that time?

A. I don't think so.

Q. All right. Then if I under-
stood you, you said you stayed with the child. Did
Mrs. Bell also stay?

A. She was there, yes.

Q. The two of you then stayed
with Allana Miller after this episode of the gagging
and the thought that you would suction her and then
decided you didn't need to do the suctioning?

A. Yes.

Q. Then what happened?

A. Then her chest seemed to fill
up a lot more and --

Q. What was the interval between
settling her down again and the chest filling up
again?

A. I guess about five minutes.

Q. Okay.

A. And we sat her up again, and
at this time I had put on the intercom in Allana's
room that would be heard out in the nursing desk for
Dr. Soulioti to come down to the room and to listen to
Allana.



1
G11 2 Q. You called for Dr. Soulioti
3 via the intercom?
4 A. Yes.
5 Q. All right.
6 A. Susan came in at that --
7 Q. Sorry, could I stop you there
8 for a moment. Was Dr. Soulioti still on the floor
9 at that time?
10 A. Yes, she was still working on
11 Justin Cook's chart.
12 Q. All right.
13 A. Susan had come in before,
14 just before I had called for Dr. Soulioti and Sue and
15 I were suctioning Allana, and that is when we put the
16 buzzer on for Dr. Soulioti. She came down --
17 Q. I'm sorry. How did Miss
18 Nelles know that there was something that she needed
19 to be there for?
20 A. Well, Bertha had told her on
21 the previous time --
22 Q. Yes.
23 A. -- going out to get the suction
24 catheters that Allana was sick or there was a problem
25 with Allana.
Q. But she hadn't come then, had
she?



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G12

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A. No.

3

Q. All right.

4

A. It was just shortly after that,

5

I thought within a few minutes she -- I thought Sue
had just finished up with Justin and then put him
down and then came in when she was free.

7

Q. You don't recall that you did

8

anything to summon her to the room?

9

A. No, I can't recall now.

10

Q. All right. So Miss Nelles

11

came in?

12

A. Yes.

13

Q. So far as you knew, I take it,

14

because she had been told a few minutes earlier that
there was a problem?

15

A. Yes.

16

Q. That problem had appeared to

17

subside and now revived, but this is when Miss Nelles
arrived?

18

A. Yes.

19

Q. All right. And you have used

20

two expressions to tell us what you did to get Dr.

21

Soulioti there. First you put on the intercom.

22

A. Yes.

23

Q. Can you communicate via the

24

25



1
G13 2 intercom with the desk?
3 A. Yes.
4 Q. And then you said you did
5 something with a buzzer for Dr. Soulioti to come. Is
6 that something different?
7 A. I may have put on the buzzer
8 for the room. There is a little light outside each
9 patient's room.
10 Q. Yes.
11 A. I may have put that buzzer,
12 that light on, to let Dr. Soulioti know that is where
13 we were.
14 Q. Okay. That is just a light,
15 or does it make a noise as well?
16 A. It makes a noise at the
17 desk --
18 Q. Okay.
19 A. -- a beep and then stops for
20 a few seconds and then beeps again.
21 Q. All right. So you look down
22 the corridor and see which light is on?
23 A. Yes.
24 Q. All right. You may have done
25 that as well?
A. Yes.



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G14

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Q. So now we have you and Mrs.

3

Bell still in the room?

4

A. I can't remember if Bertha

5

was there or not or -- Susan was there now.

6

Q. All right. We certainly have

7

you and Miss Nelles there and perhaps Mrs. Bell?

8

A. Perhaps, yes.

9

Q. And a call in for Dr. Soulioti?

10

A. Yes.

11

Q. Then what happened?

12

A. We suctioned -- Susan suctioned

Allana Miller.

13

Q. Yes?

14

A. And Dr. Soulioti came into the

15

room, over to the side where Susan was, and Susan
was standing by the window side.

16

Q. Yes?

17

A. Dr. Soulioti listend to

18

Allana's chest, had asked for some Lasix for Allana

19

Miller. Susan ran out to get the Lasix and Dr.

20

Soulioti had asked somebody for a chest x-ray to be
done stat.

21

22

23

24

25



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Q. Yes.

3

A. And I think that call was going

4

in, Susan came back with the Lasix and the Lasix was

5

given and Dr. Soulioti ran out of the room to phone

6

Dr. Schaffer.

7

Q. All right. Do you recall seeing
the Lasix drawn up?

8

A. I can recall Susan bringing in -

9

I don't recall if it was drawn up or not.

10

Q. All right. But your recollection

11

is it was Miss Nelles that went off to get the Lasix?

12

A. Yes.

13

Q. You don't recall whether it was

14

drawn up in the room or before she got back to the

15

room?

A. That's right.

16

Q. You have no recollection either

17

way on that one?

18

A. No.

19

Q. And Dr. Soulioti administered

20

the Lasix?

21

A. Yes.

22

Q. Now, if you look at the chart on

23

page 42, Mrs. Trayner, it appears that where - I am

24

looking about three-quarters of the way down the

25



H.2

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Q.

3

page - well, let's read the whole note from just under half way:

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"At approximately 0145 babe's apex was noted to be 54 and very irregular (blood pressure 98 over pulse). Child was stimulated and apex came up to 70. This happened 3-4 times. Then the child began to gag and vomit large amounts of very thick clear mucus. She was suctioned for further amounts of this mucus."

12

And then the asterisk says that:

13

14

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16

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19

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"Respirations became quite laboured. Substernal and intercostal indrawing very noticeable."

And then:

"Dr. Soulioti came to examine child and administered Lasix 6 milligrams IV push at 0240."

So, we seem then to have a time for that event.

21

A. Okay.

22

23

24

25

Q. And do I take it that all you have been describing to us after the 1:45 episode occupied the 55 minutes from that time until now,



H.3

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2:40, when the Lasix was administered?

3

A. Well, yes, I said it had to

4

have been after two.

5

Q. Yes.

6

A. So, it would be the 40 minutes.

7

Q. Incidentally, while we are

8

looking at that nursing note, Mrs. Trayner, it is

9

signed by Susan Nelles. You have told us that to the

10

best of your knowledge Miss Nelles wasn't back in the

11

room until some time after 2 o'clock. Did you provide

12

her with information as to what had happened in the

period when she was away from the child?

13

A. Yes.

14

Q. All right. And were of

15

assistance to her in helping her write this final

16

nursing note after the child had died?

17

A. Yes, I gave her my observations.

18

Q. Okay. So, now we've got the

19

Lasix administered by Dr. Soulioti by IV push at 2:40

in the morning. The note continues:

20

"At approximately 0245 babe began

21

to seizure, he became very rigid and

22

extended legs and arms."

23

I take it that accurately records the

24

observations as you recall it?

25



H.4

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2

A. Yes.

3

4

Q. Did anything occur between the administration of the Lasix and this onset of seizure-like activity?

5

6

A. No. The only thing I thought happened was that after the Lasix was given Dr. Soulioti had run out to call Dr. Schaffer.

7

8

9

Q. All right. Is Dr. Soulioti there when this seizuring began?

10

A. I think so, yes.

11

12

Q. All right. Now, someone listened and there was no heart rate at all, that could be heard anyway. Do you know who that was?

13

14

A. No.

15

Q. Whoever it was said they could hear no heart rate and so you began CPR?

16

A. Right.

17

Q. Who in fact did that?

18

A. I can't recall.

19

20

Q. All right. And a Code 25 was called. At the time that the seizuring began you were in the room?

21

A. Yes.

22

Q. Miss Nelles was in the room?

23

A. Yes.

24

25



H.5

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Q. Anybody else?

3

A. Bertha Bell was back in.

4

Q. Three of you were there. Can
you recall anyone else being present?

5

A. Dr. Soulioti.

6

7

Q. All right. Any other nurse or
nursing assistant?

8

A. No.

9

Q. All right. And a Code was called
and the arrest team arrived, resuscitation effort
followed and the baby was pronounced dead at 3:27
in the morning?

12

13

A. Right.

14

15

Q. All right. You said Dr. Soulioti
went off to call Dr. Schaffer. Did Dr. Schaffer
arrive at some point?

16

A. Yes.

17

Q. When?

18

19

A. To the best of my recollection
it was just shortly after the 25 had been put in.

20

Q. Was the arrest team already
there when he arrived?

21

A. Yes.

22

23

Q. And did he participate in the
resuscitation effort?

24

25



H.6

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A. Yes.

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Q. All right. Do you recall any discussion involving Dr. Schaffer after the child had been pronounced dead as to whether Baby Miller's death might be one to be reported to the coroner?

7

8

9

A. I remember that one of the doctors, and I don't know him by name, but he came with the arrest team, had said to Michael Schaffer is this going to be a coroner's case as well.

10

Q. Yes.

11

12

A. And I can remember Michael Schaffer saying no, we know why this baby died.

13

14

Q. All right. Now, that was the second time that you had heard a reference to a coroner?

15

16

A. Yes.

17

18

Q. At the beginning of the shift you had heard about the coroner's involvement in the Pacsai death and the likelihood of an inquest?

19

20

21

22

A. Yes.

Q. Prior to that long night shift of March 20/21, Mrs. Trayner, had you had any experience at all with deaths that had been reported to the coroner?

23

24

25

A. No.



H.7

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Q. You had never been involved in a death that led to an inquest?

A. No.

Q. Did you have any idea what was involved or what was the significance of reporting a death to the coroner?

A. No.

Q. But now you had heard it twice in one night?

A. Yes.

Q. Did you ask any questions as to what that meant?

A. No.

Q. If you look at page 48 of the chart, please, page 48 and we could have looked at any of these charts I think to find a similar list is what is called a "Death Check List". You have seen this before obviously?

A. Yes.

Q. It is in all sorts of charts. The nursing component of this chart is in fact completed by you, is it not?

A. Yes.

Q. All right. This I take it is a form that has to be completed after a death to be sure



H.8

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that all the necessary steps have been taken and
everything that requires to be done has been done?

4

A. Yes.

5

6

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Q All right. Now, in this case
Dr. Soulioti completed the physician's part of it and
I point out to you now, although you may not have been
aware of it before, that the second item that the
physician has to check is "Notify coroner if
necessary" and a box for that or a box for if it is
not necessary.

11

A. Yes.

12

13

Q Do you ever recall seeing that
before on the Death Check List?

14

A. Where are we?

15

16

Q I am under the big box "Attending
Staff or House Staff", Item No. 2.

17

A. Yes.

18

19

Q "Notify coroner" with a number
"if necessary" and a box for a checkmark there or
"Not necessary" with a box for a checkmark.

20

A. Yes.

21

22

Q Do you ever recall having seen
that before in that part of this Death Check List?

23

24

25

A. No, but I never really paid too much
concern to this, this was the doctor's part.



H.9

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Q. Okay, then let's look at the nursing part because Item 4 says:

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"Notify Medical Records if autopsy granted - pending - refused - and if coroner notified."

So, I take it every time you filled in the nursing component on this thing you had to find out if the coroner had been notified, did you not?

11

12

A. No, I just found out if an autopsy was granted or not granted.

13

14

Q. You mean you didn't address your mind to that part of this form?

15

16

17

18

A. No.

Q. You never asked whether the coroner had been notified?

19

20

A. No.

21

22

23

24

25

Q. Did it ever occur to you and wonder what that box was for then if it was something you never inquired about?

A. I knew that the coroner had to be called if a child had died in surgery or in the OR.

Q. Yes.

A. And I knew a coroner would have to be called if the child was less than 24 hours in the hospital.



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Q. All right. I take it that page 49 of this chart, or what is numbered as page 49, Mrs. Trayner, is the back of the Death Check List, is it?

A. Yes.

Q. Had you ever read that in your time at the Hospital?

A. I probably had, yes.

Q. Was it your understanding that if a patient died suddenly and unexpectedly the death might have to be reported to the coroner?

A. Yes.

Q. In that case did you not have to know in each case when you filled out the nursing part of the Death Check List whether for any reason at all the death had been reported to the coroner?

A. No, I never asked.

Q. All right.

A. And it was never mentioned to us.

Q. Okay. And you had no understanding at all of what might be the consequence of reporting a death to the coroner, or what the significance of it was?

A. No.

Q. Were you surprised by Allana Miller's death?



H.11

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A. I think I was surprised that she had died that night but she was clinically ill.

Q. Yes.

A. It wasn't, like, it wasn't a great surprise.

Q. Because of what you knew of the child's clinical condition?

A. Yes.

Q. Do you recall giving evidence at the preliminary hearing, Mrs. Trayner?

A. Yes.

Q. I am referring now, Mr. Commissioner, to Volume 4 at page 723. You were being asked about Allana Miller and at line 9 you were asked by, I believe Mr. McGee:

"What was the reaction of the nurses on the floor, particularly your reaction and Susan Nelles' reaction to the death of this baby?

"A. Well, we were really surprised, very surprised and upset. We both realized Allana Miller was sick.

"Q. You did realize she was sick?

"A. Yes.

"Q. But did you expect this kind of



H.12

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"thing to happen?

"A. No, we didn't, not that night."

Now, fairly, you have said to me today that you didn't expect the child to die that night but that the level of your surprise appears to have been greater as you recounted it at the preliminary inquiry, if I may say so. Do you recall giving that evidence then?

A. Yes.

Q. You were really surprised, very surprised and upset?

A. Well, as I was trying to explain, we were surprised that Allana had died that night.

Q. Yes. But did you not tell me a moment ago that you weren't terribly surprised by the death, you were a little bit surprised?

A. Yes.

Q. Well, can you tell me now, because I have to say to you it seems to me there is a difference in your response as between the preliminary hearing and now, were you really surprised, very surprised and upset, as you said at the preliminary hearing, or surprised but not too much, as you seem to be saying now?

A. My memory would have to be better



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for the time of the preliminary hearing, so, what I said then I would have to say is more plausible.

Q And were you indeed very upset that the baby had died?

A I don't recall being very upset; I remember being upset. I don't know what meaning there is to being, you know, very upset as to upset.

Q I agree, it may be hard to draw gradations, but I tell you, Mrs. Trayner, I am using your language. At page 724 you were asked:

"What discussion if any did you have with Susan, do you recall now?

"A. Just that we were very upset that Allana Miller had died."

A. Yes. Today I would just say that, yes, we were upset that the baby had died and that it was another death.

Q Just I take it as you would say today that you were surprised but not terribly surprised?

A. Yes.

Q And I take it you don't now have any recollection of what it was about the circumstances of that child's last hours and death that caused you at the preliminary inquiry to say



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that you were really surprised, very surprised, very upset, you can't now recall?

A. No.

Q. It is reasonable to infer I take it you had some basis for characterizing your reaction in that way at that time?

A. I may have.

Q. Well, you wouldn't have said it if you didn't believe it to be true, I take it?

A. I guess so, yes.

Q. Following the child's death did you, either during the remainder of the shift or following the end of the shift, have any conversation about the death with any of the other nurses on the floor?

A. It would just have been the normal to go down and have a coffee and a cigarette.

Q. All right.

A. And to just discuss if there was anything, but that would have been the extent of it.

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Q. You said something a couple of minutes ago that interested me, Mrs. Trayner, when we were talking about degrees of upsetness, and you said clearly you were upset when a child died, it was another death. Had it, by the morning of March 21st occurred to you that there had indeed been a string of deaths during March?

A. Yes.

Q. And were you beginning to feel some cumulative effect of that string of deaths, either by way of tension, or pressure, or anxiety, or concern; anything of that sort?

A. I think so, yes.

Q. When had you first observed that March was a month in which an awful lot of children died?

A. I don't know if it was after -- I think it was probably after Inwood, Kristin Inwood, or the morning when they took Baby Pacsai down to the Intensive Care Unit.

Q. Pacsai, as I understand it, was the sixth child to die in March, five we have on the chart, and there was Leith of course who died on March 6th. Do you think it might have been at about March 12th or 13th that it occurred to you that



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3 of deaths?

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A. Yes.

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Q. Did it occur to you at about
the same time that those deaths were occurring in the
early hours of the morning? Pacsai of course did
not die until ten o'clock in the morning, but he got
into trouble in the middle of the night, did he not?

A. Yes.

Q. Had that occurred to you at
that time?

A. I think the children dying at
night may have -- I may have thought about it just
before that, because I can recall a conversation with
Dr. Michelle --

Q. Dr. Heilbut?

A. Yes. And that was right after
Kristin Inwood had died, or it may have been just
before that.

Q. Was that the occasion when
you asked her about children dying at night?

A. Yes.

Q. And she talked about things
slowing down at night and so on?

A. Yes.



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Q. Okay. So certainly by that stage you had made the observation, you made it, and it had impressed itself on you to the point where you thought you had better ask about it?

A. Yes.

Q. And now we have, since the time of Pacsai's death, we have had Inwood, Gardner and Miller, and when you say it was another death, how, as at the morning of March 21st, were you beginning to think about these deaths? Were you beginning to wonder what was causing all these deaths on your floor in that month?

A. I don't know -- I wondered why the children were dying, but when we asked the doctors, it was that they were very sick babies.

Q. All right. Then let's move on to Cook. Let's see where that goes. You left the Hospital on the Friday morning - I'm sorry, the Saturday morning, Miller having died?

A. Yes.

Q. You came on duty again that evening.

A. Yes.

Q. Now once again let's go through our drill, although I am sure you remember this by now,



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Mrs. Trayner, we probably all do. When your team came on for duty that night, you were the team leader and you had patients in Room 426. Do you recall how many patients you had? I can't read it very clearly here.

A. It is '2', I think.

THE COMMISSIONER: It looks like '1' to me.

THE WITNESS: Oh.

MR. LAMEK: Q. I think it is '1' and the circle is a bit doubled up.

A. Okay.

Q. You had a child in 426, and we know that Miss Nelles had one child only in 418, Justin Cook, and that was constant care. Miss Brownless had four children in 418. Mrs. Christie had one in 418 and two in 421, and three in 425. Do you remember that?

A. Yes.

Q. And as I understand it, when the team comes on at the beginning of a shift, is it right that the first thing they do is go and check their assignments for the night because they are set during the day, are they not?

A. Yes.



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Q. And then they go off to get report?

A. Yes.

Q. Now Susan Nelles, you knew and she knew as soon as she came on to the floor and checked the assignments for the night, Susan Nelles and you knew that she was on constant care with Cook?

A. Right.

Q. I don't think there is anything at all sinister about this, but I am curious. Why, in that circumstance, would she be the one to do the narcotics count and hold the keys?

A. I don't know, unless Sui was on constant care.

Q. During the day?

A. Yes.

Q. And Sui was the one that had counted with the girl on days?

A. Yes.

It was a rule at that time, just a floor rule, that the team leaders that had to give report would not count the narcotics because it was tying up our time, because we would have to give report and then count the drugs, whereas another RN could do it and it would save a few minutes there.



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Q. Okay. The only other RN on your ward that night was Miss Nelles?

A. Right.

Q. So notwithstanding she had a patient under constant care, she got the task of doing the narcotics count and therefore holding on to the keys?

A. Yes.

Q. Did she stay throughout the normal report in the conference room or did she go off to do that narcotics count with Nurse Scott?

A. She would stay with Sui Scott and get report from Sui.

Q. And then would take over from Sui, having done the narcotics count? She would go and relieve Sui on the constant care of Cook?

A. Yes.

Q. And I take it they would leave someone with Cook while they went off to the medications room?

A. Yes.

Q. What is the first occasion that you recall seeing Justin Cook that night?

A. I may have seen him just before I took report.



Trayner
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Q. Yes.

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A. But I remember seeing him
after the report.

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Q. Did you make a special trip
to see him, or was that your first rounds of the ward
that night?

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A. It would have been my first
round going in and seeing him.

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Q. That would have been, what,
about eight o'clock?

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A. Quarter to eight, eight, yes.

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Q. Do you have any recollection
of how he appeared to you to be at that time?

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A. He was in Susan's arms and he
was a little irritable, that is why she was holding
him.

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Q. Did you talk to her at all
about him at that time?

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A. Just, how is he doing? What
are his vital signs? Was there any problem.

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Q. Mrs. Trayner, we have heard
about Inderal taped to the child's bed.

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A. Yes.

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Q. When you were first in his
room that night, did you notice anything of that sort?



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A. Yes.

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Q. What did you see?

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A. I saw two syringes and two
vials.

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Q. Two syringes and two vials?
Okay. Where were they?

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A. Taped to the foot of Justin
Cook's bed.

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Q. Were the vials full or empty?

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A. They were empty, I can remember
that when they were used that night, the syringe was
just handed over to the doctor, so the syringes were
full.

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Q. The syringes were full, the
vials were empty?

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A. Yes.

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Q. And are you saying that, on the
basis of your recollection, later, when they were
needed, they were merely untaped and handed over, or
do you remember when you first saw them that these
syringes were full and the vials were empty?

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A. I can remember about the vials
being open and taped and then the syringes beside them.

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Q. So it was your observation
that the vials were empty, the syringes were full, and



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that is confirmed by what later happened, I take it,
that the syringe was just removed and handed to the
doctor?

A. Yes.

Q. Now, let me be clear in my
mind, when you say vials, you are talking about, what,
small bottles with a rubber top?

A. No. This would be a little
glass top.

Q. Is that what I call an
ampule, then?

A. Okay, yes.

Q. Well, is my usage correct?

A. Yes, you are right then.

Q. It is a little glass thing
and you break off the one end of it and put the
needle into the thing to draw up the contents?

A. Right.

Q. And can I reserve the word
"vial" for a sort of small bottle-like thing with a
rubber top through which you stick the needle to draw
up the contents?

A. Right.

Q. These were ampules?

A. Right.



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Q. And you recognized them as

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Inderal ampules?

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A. Yes.

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Q. Was there any other identifying

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mark, label, tag, piece of paper, or anything else

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that you saw on the bed with those syringes and vials -

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I'm sorry, ampules? See, you have me at it now.

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A. I'm sorry. No. I can't

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recall anything.

Q. Do you know how they got there?

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A. I was told from Marie Mandal

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in report that they were, Dr. Jedeikin had said to

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have them at the bedside.

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Q. Do you know who put them at

the bedside?

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A. No, I don't.

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Q. Did you ever at any time have

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any information -- what is an ICU grad., by the way?

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A. An ICU grad.?

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Q. Yes. Does that expression

mean anything to you?

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A. It would be a grad. from the

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Intensive Care Unit.

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Q. Could it be a graduate nurse

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in the Intensive Care Unit?

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A. Yes.

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Q. Do you have any recollection of having any information at one time that it was an ICU grad. who had drawn up Inderal and taped it to Justin's bed late in the afternoon of Saturday the 21st?

A. No.

Q. Do you have any recollection of giving that information to the Crown Attorneys or to the Police?

A. I can remember they asked me and I cannot remember saying that it was done by the girls on the day shift, that they asked me who was on the day shift and my telling them that it was Sui Scott and that there was a relief from somewhere. Now, I don't know if I said it was her that taped it or not.

Q. Do you recall being interviewed on November 2, 1981 by the Crown Attorneys?

A. Hm-mm.

Q. And saying, between 5:00 and 6:00 p.m., someone, I think it was an ICU grad. drew up some Inderal and taped it to Justin's bed, this is because he had a severe blue spell and Dr. Jedeikin ordered Inderal taped to the bedside? Do you remember saying that to them?



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A. I remember telling them who was on, and they asked who drew it up and me saying I thought it would have been the ICU grad.

Q. Do you recall now the basis for you having thought that? Now that I have reminded you of what you appear to have said in November 1981, does that jog your memory as to what the source of that belief was? You said you thought it was an ICU grad. who had drawn it up and taped it to the bed?

A. Yes.

Q. Does it assist you now in recalling what it was that made you think that?

A. Well, they had said, had told me that Sui Scott hadn't drawn it up, and who else on the floor would have drawn it up. I can recall saying that there was Marie Mandal and the ICU grad., or the relief person.

THE COMMISSIONER: When you said there was an ICU grad., you still haven't quite told us what it does mean.

THE WITNESS: I think what it means is that she was a relief from the Intensive Care Unit.

MR. LAMEK: Q. Now, if I look at the assignment book for the day shift of March 21st, Mrs. Trayner, Miss Mandal was on and in charge; Miss



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Partridge was there, Miss Cooney was there; Mrs. Scott was relieving there on long days, and on relief was Miss Palmer. Do you know who Miss Palmer was?

A. The ICU relief, I knew she was a relief.

Q. I have no idea whether she was from the ICU or not. Let me show you the book.

THE COMMISSIONER: I'm sorry, I must be looking at the wrong one.

MR. LAMEK: Page 179, I think, sir, of the assignment book.

THE COMMISSIONER: Yes. I have that.



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MR. LAMEK: Q. We have Miss Mandal in charge. Her regulars are Partridge, Cooney and Scott - Scott is relieving but also relieved Miss Palmer.

A. Yes.

Q. Do you have any idea who Miss Palmer was? Was she from the ICU?

A. She could have been.

MR. OLAH: Excuse me, Mr. Lamek. I think Miss Partridge was ill that day. Her name was crossed out on the WIN sheet.

MR. LAMEK: I said Palmer, did I not?

MR. OLAH: Yes, but you had said Miss Partridge.

MR. LAMEK: Yes, you are quite right Partridge was ill.

Q. She is shown as ill in the morning and crossed off in the afternoon.

A. Yes.

Q. But Palmer was there relieving as well as Mrs. Scott.

A. Uh-huh. I would have known where Miss Palmer was or who she was when I got the report that Saturday morning then from Lynne Johnstone when she would phone and give me my relief.



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Q. Yes.

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A. She would say she had an RN
from 7G or ICU or 5G.

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Q. And if then you told Crown
Attornies in November that you think it was an ICU
grad who drew up the Inderal and taped it to Justin
Cook's bed, you think you were probably referring to
the nurse who was relieving on the floor that day?

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A. Yes.

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Q. All right. Was it merely an
inference that it was she who had drawn up the
Inderal and taped it to the bed or somebody told you
that?

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A. No, it was an inference.

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Q. All right. In any event what
you saw was two empty ampules of Inderal - two
empty Inderal ampules and two full syringes?

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A. Right.

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Q. And you had been told, you said,
by Miss Mandal that those were there on physician's
instructions?

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A. Yes.

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Q. All right. Having seen Justin
Cook as you have told me certainly not later than
about quarter to eight, 8 o'clock, on your first



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round, and you may have seen him even earlier right after report, when did you next see him? When were you next in Room 418?

A. I thought it was some time around 8:30 in the evening because Susan had asked me to check Justin's IV. She thought it was interstitial or blocked. I thought it to be around 8:30.

Q. All right. Did you do that? You went and checked the IV?

A. I had asked her was there any blood return and Bertha was in the room then or she was going into the room and I had just - a parent was coming down to talk to me so when I had finished with that parent I went in to Susan and asked her if the intravenous was interstitial or not, and she said no, that Bertha and her had fixed it and it was okay.

Q. Okay. Just explain to us if you would, please, the significance of the question was there any blood return?

A. If there is blood return in the tubing from the IV that means that the needle is in the vein.

Q. Yes.



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A. And it is okay. If there is no blood return then it is either infiltrated and it is out of the vein and therefore is interstitial and has to be restarted.

Q. Miss Nelles and Mrs. Bell appeared to be satisfied that the IV was not interstitial, it was still in place in the vein and you think that was about 8:30?

A. Yes.

Q. All right. When next did you see Miss Nelles and Justin Cook?

A. About 9 o'clock.

Q. How did it come about that you saw the child and Miss Nelles then?

A. Dr. Costigan had just come onto the floor and had told me to hold my 9 o'clock digs. or the digoxins, and that he would get back to me when to give them out.

Q. Okay. We have heard that 9 o'clock is the usual time for administration of the evening digoxin doses. And Costigan was therefore on the floor a little before 9?

A. He would have to be because the parent had come down to me had wanted me to give her daughter the digoxin a little early. I guess it would



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have to be about 8:30 actually, 8:30 then that I spoke to the mum because the mother was going home and she wanted to settle the girl.

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Q. I take it that any digoxin that was to be administered on 4A that night was going to be administered by you?

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A. Yes.

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Q. Because other than Miss Nelles you were the only nurse, registered nurse, on duty?

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A. Yes.

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Q. And the RNA's can't administer digoxin?

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A. No.

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Q. And Miss Nelles was tied up with one person and couldn't leave him to do medications anywhere else?

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A. Right.

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Q. And that patient wasn't on digoxin?

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A. Yes.

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Q. So any digoxin to be administered that night was to be done by you. When Dr. Costigan came and told you to hold the 9 o'clock administration did you already have the doses prepared?

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A. Yes.

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Q. I take it you seize the

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opportunity when it arises to draw up the doses that
you know you are going to have to deliver?

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A. Yes.

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Q. Did you have them set out on

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a medications tray?

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A. Yes.

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Q. And he got there before you

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actually did the administration and said don't give
the 9 o'clock digoxins?

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A. Right.

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Q. Is that what he said, "Don't

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give the 9 o'clock digoxins", or did he say delay
them or hold them or what did he say to you?

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A. Hold them.

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Q. Hold them?

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A. Yes.

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Q. Did you ask why?

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A. Yes, and he had told me that

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they were checking the concentration of the digoxin
elixir and they were taking it down to the pharmacy

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just to check the concentration and that he would

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get back to me in 20 minutes or so and let me know

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what to do.

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Q. And that may have been as early as 8:30 or perhaps a little closer to 9 o'clock?

A. Yes.

Q. But in any event before you had administered the 9 o'clock digoxin doses?

A. Right.

Q. Did he give the same instructions to Mrs. Bell?

A. Yes.

Q. Did she hold her doses?

A. Bertha had already given hers out.

Q. Okay. He got to her a little too late?

A. Uh-huh.

Q. But you delayed giving yours I take it?

A. Yes.

Q. He came to the floor to give you those instructions?

A. Yes.

Q. Did he take bottles of the elixir with him when he left?

A. Yes.



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Q. All right. Did he take every bottle of elixir that you had on 4A with him?

A. We only had the one bottle so that he took the one bottle.

Q. And he took that one?

A. Yes.

Q. What was it about that that led you to see Justin Cook and Susan Nelles?

A. Janet Brownless had come out into the hallway and she said that Susan Nelles wants to know what Dr. Costigan had said.

Q. All right. So did you go and tell her?

A. Yes.

Q. And that I take it was a bit of an unusual thing that Costigan had done?

A. Yes.

Q. Had you ever before had digoxin or any other medication taken off the floor to check its concentration?

A. No.

Q. All right. Did you ask Costigan why that was being done? Why was it necessary to check the concentration?

A. I don't know if I had asked him



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then. I had asked him if there was a problem with it, and he just said that they just wanted to check out the concentration to make sure what was said on the bottle was exactly what was inside the bottle.

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Q. And did you repeat to Miss Nelles everything that had passed between you and Dr. Costigan?

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A. I was on my way in to tell her and I got half of the story out when Bertha had come in and said "Did you hear about the digoxin?"

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Q. All right. So there were now three of you in the room?

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A. Yes.

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Q. All right. Let's start with - you have told us what your reaction was to the instructions. Did either Mrs. Bell or Miss Nelles say anything about the instructions that had been given by Dr. Costigan?

A. Just that it was strange, that it was unusual, and there was a comment made that something big was going on.

Q. Do you recall who said that?

A. No, I can't. There was three of us in the room at the time.

Q. When the comment was made did



Trayner, ex.
(Lamek)

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anyone react to it, "What do you mean?"

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A. Susan said something that maybe
that is why Baby Pacsai had had a high level.

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Q. Perhaps the concentration of
the digoxin may have been wrong?

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A. Right.

Q. Pacsai died a week before?

A. Yes.

Q. Did anyone say, "Well, gosh,
what about all the other children who had had digoxin
out of that bottle since then?"

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A. No, we didn't.

Q. Did that occur to you that
other children had probably had digoxin from the
same bottle as had been used with Pacsai over on
4B?

A. It occurred to me, yes.

Q. Yes.

A. But we hadn't tested anybody
for a digoxin level so we had no way of knowing
really if the digoxin was high or not high. All
we knew about was Pacsai's level.

Q. Okay. Any other comment made
during that conversation between you and Susan Nelles
and Bertha Bell?



1

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A. At that time?

3

Q. Yes.

4

A. I had asked Bertha what should

5

I tell my parents.

6

Q. You mean the parents of your

7

patients?

8

A. Yes.

9

Q. Yes.

10

A. About holding the digoxin, and

11

we both came up with the solution that we were waiting

12

for some blood results or some lab results for the

13

individual child and that we would get the digoxin

out as soon as we could.

14

Q. All right. Other than the

15

suggestion that maybe that is why the Pacsai level

16

was so high and someone saying something big is going

17

on, how did Miss Nelles and Mrs. Bell appear to you

18

to react to this rather strange, this unusual

19

development of having medication being taken off

the floor to have its concentration checked?

20

A. Bertha was just - she seemed

21

to be a little concerned because she had already

22

given hers out.

23

Q. Yes.

24

A. And she had hoped it was going

25



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to be okay because her children had already had it.

3

Q. Yes.

4

A. Other than that it was just -

5

it was unusual. Nothing like that had ever happened
to us on the floor before.

6

Q. And you all agreed it was

7

unusual?

8

A. Yes.

9

Q. Did you all accept the

10

explanation that was given that the material was
taken away to check the concentration?

11

A. Yes.

12

Q. Then what happened?

13

A. Dr. Costigan hadn't got back

14

to me yet and we had put a page in for him. He

15

had answered his page by phoning us on the phone and

16

I had asked him what about the digoxin, so this is

17

shortly - this is close to 9, oh, 9:20, 9:30 now.

18

Q. Yes.

19

A. And he said to hold off and

20

he will be up in a few minutes to let us know what
is happening.

21

Q. And did he in fact come up in

22

a few minutes?

23

A. About 10 minutes, yes.

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Q. Okay. So we are now at

9:30, 9:40, something like that?

A. Yes.

Q. What did he tell you?

A. He said that the concentrations were okay. We could go ahead and give out the digoxin. This time have it double-checked and double-signed for and when you are finished with all the digoxin lock it up.

Q. I take it he brought back to you some or the oral elixir?

A. Yes.

Q. Go ahead and give out the digoxins but this time double-check it - you had always double-checked digoxin had you not?

A. Yes.

Q. The dose always had to be checked with another nurse before it was administered?

A. Right.

Q. Double-signed for it?

A. That was the unusual part.

Q. That was new?

A. Yes.

Q. This time the nurse with whom the dose was checked had to sign?



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A. Yes.

3

4

Q. And when you have given out the digoxin, lock it up?

5

A. Lock it up for tonight.

6

7

Q. All right, lock it up for tonight. So there were two unusual things, were there not?

8

A. Yes.

9

Q. Double-signing and lock it up?

10

A. Yes.

11

12

Q. Did it occur to you to wonder why those instructions were given?

13

A. I asked him why.

14

Q. What did he say?

15

A. He said that there would be a pink memo coming around tomorrow to explain it all.

16

17

Q. Were you content to wait until the next day for an explanation of those strange instructions?

18

19

A. Hm-mm.

20

THE COMMISSIONER: Yes, this will be fine.

21

MR. LAMEK: Is this a good time?

22

THE COMMISSIONER: Yes. Until 2:15.

23

---Luncheon recess.

24

25

BmcB.jc
AA

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--- Upon resuming at 2:15 p.m.

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THE COMMISSIONER: Yes, Mr. Lamek.

4

MR. LAMEK: Thank you, sir.

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Q Mrs. Trayner, at some stage someone is going to learn to stop giving me breaks and lunch and things like that because every time they do I think of things I want to go back to.

11

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A. Right.

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A. Yes.

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Q And I asked you if it occurred



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to you that if that were the case then perhaps other children might have had high digoxin levels in the intervening period between Pacsai's death and the 21st of March; do you remember?

6

A. Yes.

7

8

Q. And you said but, you know, there hadn't been any other digoxin levels recorded?

9

A. Yes.

10

Q. Of course, that wasn't quite so, was it?

11

12

13

A. No, I didn't mean that we didn't have digoxin levels recorded, it was digoxin levels we hadn't heard of other than Pacsai.

14

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Q. Well, did you not know that on the very morning that Pacsai died Kristin Inwood also on 4B received a dose of digoxin in error that was intended for Pacsai?

17

A. Right.

18

19

Q. And indeed that was too large a dose for that child, was it not?

20

A. I can't remember what the dose was, really.

21

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Q. The problem I believe, as I understand it, was that Inwood received a dose intended for Pacsai and it was too large a dose for



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Inwood. Do you recall learning that at 9 o'clock that morning, some three and a half hours after the dose was administered, that Inwood had a digoxin level of 2.6 on the morning of March 12th?

A. No. I can remember asking about, if they were going to do a dig. level and that night when we came back Mary Jean said the dig. level was fine.

Q. I'm sorry, that whose level was high?

A. No, the dig. level was fine.

Q. Was fine.

A. Yes, on Kristin Inwood.

Q. But you didn't know what it was?

A. No, I didn't.

Q. And of course there had been digoxin levels taken on your side of the floor, had there not, Allana Miller had a dig. level on March 19th. Were you aware of that?

A. Probably, yes.

Q. Yes. And from page 87 of the chart it seems that that level was 0.6?

A. Right.

Q. But all this didn't occur to you of course on the night of Saturday when you learned



AA.4

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that the dig. was being tested I take it?

3

A. No, I didn't.

4

Q. Right. Now, with respect to Dr. Costigan's instructions which is where we were I think, and he came back to the floor and he told you, as you have said, that you go ahead and do the 9 o'clock digs., they were now late of course?

8

A. Yes.

9

10

Q. That they were to be double checked, which was standard procedure, they were to be double signed, which was new, and then the dig. was to be locked up?

11

12

A. Yes.

13

14

Q. All right. Did you then go about and administer the 9 o'clock digoxin doses?

15

A. Yes, I did.

16

17

Q. All right. Now, that night since you and Miss Nelles were the only RN's on the floor I take it you had to do digoxins for Mrs. Christie's patients and Miss Brownless' patients?

18

19

A. Right.

20

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Q. And there were some digoxins amongst those obviously because you had drawn them up and they were prepared?

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A. Yes.

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AA.5

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Q Did you have those doses checked
by somebody?

A I originally had the doses
checked with Bertha Bell.

Q Yes. At the time that you had
drawn them up?

A At the beginning, yes.

Q Yes. So, you had satisfied
that part of the requirement already by the time
Costigan came back and said you could go ahead and
administer the drug?

A I think what we did was, we
discarded the digoxin.

Q Okay.

A And we started from scratch again.

Q You started from scratch and you
drew up new digoxins, and who checked them this time
with you?

A Bertha.

Q Did she double sign the
medication sheets?

A I remember asking her, I don't
know if she got around to all of them.

Q All right. Well, I can tell
you only this, Mrs. Trayner, that over the course of



AA.6

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lunchtime I checked charts of other patients who were in 418 and not one of them is double signed for that night. Does that cause you any surprise or concern? I can show them to you if you choose?

A. No. Did I sign for them?

Q. Well, you signed for them but there was no double signing.

A. Well then, Bertha may not have signed for them; they were double checked with her.

Q. All right. Now, you have told me that when Dr. Costigan gave you those instructions, that you can go ahead and administer the 9 o'clock dose late, he said there would be a memo the next day explaining these other new instructions?

A. Yes.

Q. Did you understand that those instructions were to hold only for Saturday night or that they were going to be ongoing instructions, the double signing and the locking up?

A. I understood that we had to lock it up for the Saturday night.

Q. Yes.

A. That was his instructions, lock it up for tonight and there would be a memo around tomorrow. I understood that we had to double sign,



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double check for it on the Saturday night, I wasn't
sure what we were going to do following that night.

Q All right. But as you have
told me you were content to wait and see what that
memorandum said?

A Right.

Q And you didn't press him for any
explanation?

A No.

Q But the night before you had
learned about the Pacsai inquest, had you not?

A Right.

Q And you had been sufficiently
concerned about that, that was at least one of the
reasons you were taking the gentamicin into Miss Nelles
to satisfy her that you were indeed going to
administer what was ordered?

A Yes.

Q Is that fair?

A That's fair.

Q And now on Saturday night there
were other very unusual things happening, were there
not, the dose had been delayed?

A Yes.

Q And now it had to be double



AA.8

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signed and locked up?

3

A. Right.

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Q. Now, coming on top of the news that you had received on Friday night and the concerns that that had caused you and the death of Allana Miller the night before, were you not at all concerned to say to Costigan when he came back with these new instructions, look, what is going on? You had never had instructions like that before had you in the whole time you had been on the floor?

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A. No. He assured us that we would find out more about it the next day with a pink memo and I understood at that time, that night, to lock it up for the night only. Now, I had also understood that Dr. Costigan had sent out another bottle to another independent lab to check the concentration.

17

18

19

Q. Yes. Did he tell you that?

A. Yes.

21

22

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Q. On the occasion of the second visit?

A. No. Well, the first time when he came up and took our bottle of digoxin.

Q. Yes.

A. That he wanted to test our bottle in our lab and that he would get back.



AA.9

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Q. Yes.

3

A. So, I understood that they were still testing it at another lab and we would find out more tomorrow when the pink memo came around.

5

6

Q. Okay, let's think about that one for a moment. First let me be clear as to the sequence. When Dr. Costigan came before 9 o'clock and took your bottle of oral elixir --

7

8

9

A. Yes.

10

Q. -- you understood it was to be checked in the Hospital's lab?

11

12

A. Yes.

13

14

Q. When did he tell you that he was sending another bottle out to an independent lab for checking?

15

16

A. That it had already gone.

17

18

Q. When did he tell you that though?

A. He told me that at about 8:30

that night.

19

20

Q. At the same time he took one bottle for checking internally at the Hospital and told you that he had already sent another bottle out?

21

22

A. Yes.

23

Q. Not I take it from your medications cupboard?

24

25



AA.10

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A. I understood it to be from 4B.

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4

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7

A. Yes.

8

9

Q. Otherwise he wouldn't have been telling you to administer doses, would he?

10

A. Right.

11

12

13

14

Q. If then that bottle were of the appropriate concentration did it occur to you to wonder why you had to lock it up and why you had to double sign for it? It wasn't a question of the concentration any more, was it?

15

16

17

18

A. No. I wondered why it was being locked up but we were going to find out in the morning. Dr. Costigan wasn't volunteering any information and we would find out in the morning.

19

20

Q. All right. And fairly you weren't pressing him too hard for information, is that fair?

21

22

A. That's fair.

23

24

25

Q. All right. Did you discuss those new instructions that you had received now from



AA.11

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Dr. Costigan with anyone on the floor?

3

A. I went back to tell Susan Nelles.

4

Q. Yes.

5

A. And she had overheard the
conversation.

6

Q. What was her reaction to the news?

7

A. Just, oh, really.

8

9

Q. If anything she was less curious
than you were?

10

MR. PERCIVAL: Mr. Commissioner, I'm

11

a little confused because we have gone back to the
first visit. Are we back to the second one again?
I'm sorry, Mr. Lamek.

12

13

MR. LAMEK: No, I am talking about the
new instructions was the question.

14

15

MR. PERCIVAL: I am sorry then, I
misunderstood.

16

17

MR. LAMEK: And the new instructions
came on the second visit, did they not?

18

19

THE WITNESS: Yes.

20

MR. LAMEK: Q. The locking up and the
signing and the double signing and so on?

21

22

A. Right.

23

Q. And you went and told Susan
Nelles about those instructions?

24

25



AA.12

(2)

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A. Yes.

3

Q. She had overheard it from 418?

4

A. Yes. Well, we were standing
outside Room 418 and she overheard.

5

6

Q. And you said her reaction was
"Oh, really"?

7

A. Yes.

8

9

Q. And I think I asked you whether
to you she appeared to be even less curious than you
were about the matter?

10

11

A. She had asked me why, did
Dr. Costigan tell us why.

12

13

Q. Yes.

14

A. And I said, no, we will find out
tomorrow with our little pink memo.

15

16

Q. All right. And was it then that
she said "Oh, really"?

17

A. Yes.

18

19

Q. All right. Did you talk to any-
one else about it that night?

20

A. In passing with Bertha.

21

Q. In passing with Bertha. Tell me
how that came about?

22

23

A. Dr. Costigan had asked me where
the girl in charge of 4B would be, so, I told him and

24

25



AA.13

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then just to make sure that Bertha knew I had asked
her if she had spoken with Dr. Costigan.

3

4

Q. And had she?

5

A. Yes.

6

7

Q. And was there any discussion
between the two of you as to the instructions that
Dr. Costigan had given?

8

9

10

11

A. It was surprising that we were
locking it up but he also told Bertha that we would
find out tomorrow morning what new other arrangements
would be made.

12

13

Q. Was there any discussion with
anyone else on the floor?

14

A. No, only I recall asking Susan
to lock it up.

15

16

Q. All right.

17

A. Nothing more than that.

18

19

Q. Well, let's come to that then.
You gave the dig. doses following Dr. Costigan's
go ahead. So far in this night we've had Miss Nelles
I take it in Room 418 constantly with Justin Cook?

20

21

A. Right.

22

Q. Did she at some point have a break?

23

A. Yes, she did.

24

Q. When did that happen?

25



AA.14

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A. Shortly after eleven.

3

4

Q. Was that after Dr. Costigan had
come back with the news that you could do the dig.
but with these instructions?

5

6

A. Yes.

7

8

9

Q. All right. I have probably asked
you this but could you remind me. Approximately what
time did Dr. Costigan come back to the floor with
those instructions?

10

11

A. I thought it to be about a
quarter to ten.

12

13

THE COMMISSIONER: 9:30 is the note I
have.

14

MR. LAMEK: Okay, thank you.

15

16

Q. Did you immediately thereafter
draw up the digs., have them checked and administer
them?

17

A. Yes.

18

19

Q. So, you finished that by about,
what, 10 o'clock?

20

21

A. I had to wake up the boys, the
older children.

22

Q. Yes.

23

24

25

A. So, it took me a little longer.
So, about 20 minutes, 25 minutes to get it all out.



AA.15

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Q All right. So, by a little after
ten you had finished the task?

4

A Yes.

5

Q Of giving the digs. out?

6

A Yes.

7

Q And you were now to lock up the
dig.?

8

A Yes.

9

Q Now, as we know, Susan Nelles
had the keys?

10

11

A Right.

12

Q Because she had done the
narcotics count that night with Sui Scott?

13

A Right.

14

Q When did you do anything about
locking up the digoxin?

15

16

A I finished the paperwork that I
had to get done for ten-thirty or a quarter to eleven
and when I went in to relieve Susan I had asked her
then when she goes out for coffee could she please
lock up the digoxin.

17

18

19

20

Q And what time was that?

21

A Shortly after 11 o'clock.

22

Q Why having distributed the digs.
by ten or a little after ten, why did you not go and

23

24

25



AA.16

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get the keys and lock up the dig. as you had been
instructed?

3

4

A. Well, Susan had the keys.

5

Q. Yes, I know.

6

A. And she had a double gown on. It
was awkward to go in and get the keys from Susan. I
knew I had to go in and relieve her within a half an
hour and she could lock it up when she left.

8

9

Q. And when you say she had a double
gown on, she was wearing her uniform in the normal way,
I take it?

10

11

A. Yes.

12

13

Q. And then a sort of a hospital
gown over the top of it?

14

A. Yes.

15

Q. Two gowns over the top of it?

16

A. Yes.

17

Q. Okay. Help me, how did that make
it awkward to get the keys from her?

18

19

A. Because the gown is tied at the
back and then tied at the waist.

20

Q. Yes.

21

A. And her pockets would be under-
neath that.

22

23

Q. Were the keys in her pocket or

24

25



AA.17

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2

around her neck?

3

A. In her pocket and around her

4

neck, they drag down. But they are on a long string

5

and you can put them around your neck and then they

6

hang in your pocket.

7

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B
M/cr

Q. Did you at any time prior to
11 o'clock go to her and say, you know, can I
conveniently get the keys from you?

A. No, I don't think so.

Q. All right. You decided in your
mind that it was not a convenient thing to do, and
therefore you would wait until she had a break?

A. Right.

Q. And that was about an hour after
you finished giving out the dig's?

A. Right.

Q. From the time you finished
giving out the dig. until you went to relieve Miss
Nelles for a break, were you in Room 418 at all?

A. If I had to give digoxin out
in that room I would have been.

Q. Yes.

A. Other than that --

Q. I said from the time you
finished giving out digoxin.

A. No.

Q. You were not back in Room
418?

A. No.

Q. You are quite right, obviously you



1
2 were in Room 418 to give some digoxin to some of the
3 other children in that room, or some of the other
4 children in that room. Where was Justin Cook at that
5 time?

6 A. He was in Susan's arms.

7 Q. Throughout the time that you
8 were there?

9 A. Hm-mm.

10 Q. So you went back you say at
11 about 11 o'clock to relieve her?

12 A. Yes.

13 Q. And she went out to have her
14 break?

15 A. Yes.

16 Q. For how long?

17 A. About 45 minutes.

18 Q. In fact if that were closer
19 to an hour would that be approximately right?

20 A. Right.

21 Q. Because you have on other
22 occasions, have you not, testified that she was out
23 from about 11 until about 12?

24 A. Right.

25 Q. Do you recall that?

A. Hm-mm.



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Q. May we take it that that is reliable evidence as to the length of time that she was out, approximately an hour, from about 11 to about 12.

A. Okay.

Q. And you stayed with Justin Cook for that period of time?

A. Yes.

Q. Until around midnight?

A. Yes.

Q. Watching television?

A. No, I was settling Justin Cook.

Q. Did you not watch television at all during that period?

A. The T.V. was on, it was right above me.

Q. And that was that famous old movie, was it?

A. Gone With The Wind?

Q. That was Gone With The Wind. All right. Did you leave the child's bedside at all during that time?

A. No, I didn't.

Q. And when you relieved Miss Nelles



1

2

for her break, you asked her to lock up the digoxin?

3

A. Yes, I did.

4

Q. And she came back at about
midnight?

5

A. Right.

6

Q. Did she tell you whether she
had locked up the digoxin?

8

A. She told me she had.

9

Q. Did you tell her to lock up
all the digoxin?

10

A. Yes.

11

Q. This is asking a lot of you,
Mrs. Trayner, but can you now recall what you said
to her?

12

13

14

A. I said to her, I have left all
the digoxin on the counter, can you lock it all up.

15

16

Q. And what was the digoxin that
you had left on the counter?

17

18

A. The adult vials, the paediatric
vials, the digoxin elixir was also there and some
tablets I think that were there.

19

20

Q. Had you needed all the forms
of the digoxin preparations to do the delayed 9:00 p.m.
digoxin?

21

22

23

A. No, I just needed the elixir.

24

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Q. And what, had you taken the other forms, the adult and paediatric ampules and the tablets out of their normal place?

5

A. Yes, they were above the counter in little spaces.

6

Q. Yes.

7

A. The digoxin is in the cupboard.

8

Q. Yes.

9

A. So I just took everything down that was there, left it in the centre on the counter with the elixir there as well.

10

11

Q. With the expectation that Miss Nelles would take everything that was there and put it in a cupboard and lock it up?

12

13

14

A. Right.

15

16

17

18

Q. Do you recall some time in the course of the evening Dr. Costigan coming back to the floor to count, or take an inventory of the digoxin that you had?

19

A. Yes.

20

Q. Do you recall what time that was?

21

A. It was after midnight.

22

Q. After midnight. All right. After Susan had come back from the break saying she

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had locked up the digoxin?

A. Right.

Q. When she came back telling you that she had locked up the digoxin, what did she do with the keys?

A. She came back around 5 to 12 and handed me the keys and said, I have locked up the digoxin, I am going down for a paper.

Q. Right.

A. I will be back in a minute.

Q. Okay. From that point on that night did you have the keys?

A. Yes, I did.

Q. And they stayed in your possession throughout the rest of the night?

A. Yes.

Q. And that was a few minutes before midnight?

A. Yes.

Q. And did she come back shortly?

A. Yes.

Q. After she had gone down for a newspaper?

A. I suppose so.

Q. At least that's where you



1

2

understood she had gone?

3

A. Yes.

4

Q. Did you then leave the room?

5

A. I checked an Inderal with her.

6

Q. Because Justin Cook had to
receive his Inderal at midnight, did he not?

7

A. Right.

8

9

10

11

Q. Perhaps we should look at the
chart just to remind ourselves about that. The
medication chart is at page 17, and there are two
orders written for Propranolol, or two orders
recording Propranolol.

12

A. Yes.

13

14

15

16

17

Q. One written on the 20th
apparently calling for 3 milligrams every eight hours;
and on the 21st for 4 milligrams every six hours.
The dose was increased and the frequency was increased,
is that right?

18

A. Hm-mm.

19

20

21

Q. And there was a dose due at
midnight, for which Miss Nelles has signed on the
medication sheet. Now what did she have to check
about that Inderal dose?

22

23

24

25

A. We had a - she just -- we have
always checked Inderal on our floor.



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Q. Yes.

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A. And she had 3 milligrams that was drawn up in a syringe labelled by Sui Scott, Inderal suspension, and Susan had remembered that the Inderal had been increased from 1800 so we needed another cc. We didn't have any extra in our medication cupboard so we broke open a vial of the parenteral solution.

9

Q. Yes.

10

11

12

A. And she drew that up into the syringe and we gave the 3 milligrams plus the extra 1 milligram.

13

14

Q. Now the 3 milligrams of the oral preparation you say were drawn up into a syringe in the refrigerator?

15

A. Yes.

16

Q. And labelled by Sui Scott?

17

A. Yes.

18

Q. And she had been on during the day?

19

A. Yes.

20

21

22

Q. When you had taken report that night had you been told that that Inderal had been drawn up and placed there by Mrs. Scott?

23

A. I think so, yes.

24

25



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Q. And had you seen it earlier in
the course of the evening?

3

4

A. No.

5

6

Q. You hadn't? All right. Did
Miss Nelles raise any question with you as to whether
it was appropriate for her to administer Inderal that
had apparently been drawn up by someone else?

7

8

A. No, she didn't.

9

10

Q. Did you have any objection to
her doing that?

11

A. I don't think I had, no.

12

Q. You didn't voice any in any
event?

13

14

A. No.

15

16

Q. Did she also ask you whether
it was appropriate to use the parenteral preparation
for the additional 1 milligram that was needed?

17

18

A. I think the conversation just
went that we can use it, can't we, if it is an emergency
we can.

19

20

Q. You considered it was
appropriate in that situation to use it and
administer it orally?

21

22

A. Yes.

23

24

Q. And that is what she did?

25



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A. Yes.

3

Q. In your presence?

4

A. Yes.

5

Q. And did you then leave?

6

A. Yes.

7

Q. Now I am going to ask you about

8

two visitors to the floor. We have already referred

9

to one of them, and that is Dr. Costigan who came

back to do an inventory of digoxin?

10

A. Yes.

11

Q. The other one I am going to

ask you about is Mrs. Johnstone, the night supervisor.

12

A. Hm-mm.

13

Q. And she was also on the floor

14

some time after midnight, was she not?

15

A. Yes, she was.

16

Q. Can you remember the sequence

17

in which those two people came to the floor, Dr.

18

Costigan and Mrs. Johnstone, which of them came first?

19

A. Dr. Costigan and Dr. Mounstephen.

20

Q. And did they take an inventory

of the digoxin in your medication room, in 4A?

21

A. Yes, they did.

22

Q. And were you with them when

23

they did that?

24

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A. Yes. I had to open up a
narcotic cupboard for them.

Q. You now had the keys?

A. Yes.

Q. You opened the cupboard, and
did you stay while they counted the digoxin?

A. Yes, I was in the room.

Q. It is an awfully small room,
I know.

A. Once you get in you can't get
out until they leave.

Q. Was any digoxin on the counter
at that time?

A. No, there wasn't.

Q. And they took their count and
they left?

A. They went over to the crash
cart to check the emergency crash cart.

Q. Was there any digoxin there?

A. I don't believe so, no.

Q. Was digoxin normally kept
on the crash cart on 4A?

A. No.

Q. Did they go to 4B to carry out
the same exercise, as far as you knew?



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A. I think they had counted 4B, when they got to my side they said "Oh good it's locked up". Could I tell 4B to lock their's up. I don't know whether they went back to 4B then at that point or not.

Q. How long were they on 4A?

A. A few minutes, three minutes.

Q. And you were in the medication room letting them into the cupboard, and you were, if you will forgive me, locked in and couldn't get out once you were in that room while they were doing their count?

A. Right.

Q. Did you take that opportunity to ask again what the reason was for these instructions?

A. No, I didn't.

Q. Did you raise the subject at all with them?

A. No.

Q. And then Mrs. Johnstone came to the floor, what time was that to the best of your recollection?

A. We called her to come to the floor.

Q. And why did you do that?



1

2

A. Dr. Jedeikin had just come
back from being outside of the Hospital.

3

4

Q. Yes.

5

6

A. And he wanted to get a
medication and he had asked Bertha and I how to go
about getting the medication, the medication was
prostoglandin.

7

8

9

Q. Did you not have any in your
medication cupboard?

10

A. No.

11

Q. All right.

12

13

14

15

A. So we said we would call the
supervisor and she will go and get it for you. That's
why Lynne Johnstone was on the floor, we called her
and told her to come up because Dr. Jedeikin wanted
to get some medication from the pharmacy.

16

17

18

Q. Was that visit by Lynne
Johnstone to assist Dr. Jedeikin before or after the
Costigan inventory taking?

19

20

A. That was after Doctors Costigan
and Mounstephen had counted them and left.

21

22

Q. And did Mrs. Johnstone then
go off to the pharmacy with Dr. Jedeikin?

23

24

25

A. She came to the floor and then
took Dr. Jedeikin out with her.



1

2

Q. And was she back on the floor
later to do her rounds as night supervisor?

3

4

A. I think so, yes.

5

Q. And at that stage do you have
any recollection of that visit in her rounds?

6

7

A. I can remember her saying I
will be back for a cup of coffee, that's about all
I can -- we went around and we saw all the children,
but I don't know what time that was at.

8

9

10

Q. From the time that Susan Nelles
came back from her break, went to get her newspaper,
went to get the Inderal, administered the Inderal
from that time when you left the room until the time
that Doctors Jedeikin and Mounstephen came to you
to do their inventory were you in the medications
room at all?

11

12

13

14

15

16

A. It was Dr. Costigan and Dr.
Mounstephen.

17

18

Q. I am sorry, Dr. Costigan and
Dr. Mounstephen?

19

20

A. No, I don't believe so.

21

22

Q. But you do recall that when
Dr. Costigan and Mounstephen left they were pleased
that all the dig. was locked up?

23

24

25

A. Yes.



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Q. When you went in there to let them into the cupboard with your keys there was no dig. out on the counter?

5

A. That's right.

6

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Obviously I can't ask you to tell me what they saw,
but do you have any explanation for those two people
saying that not all the dig. was locked up at midnight?

A. No, I have no explanation for
what they said.

Q. And you certainly didn't see
any dig. not locked up after midnight?

A. No. It was locked up and it
was counted.

Q. From the time that Susan
Nelles gave the keys to you, nobody could have opened
the cupboard to put any other dig. back into it,
could they?

A. No.

Q. Did you just have one bottle
of elixir --

A. Yes.

Q. -- on the floor?

A. Yes.

THE COMMISSIONER: In the ward.

MR. LAMEK: In the ward, yes.

Q. In your medication --

A. We had one on 4A.

Q. Yes. And that was the one
that Dr. Costigan had brought back and told you that



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you couldn't do the digs.?

3

A. Right.

4

Q. There had only been one prior
to that and he had taken that away at 8:30, quarter
to nine, something of that sort?

5

6

A. Right.

7

8

THE COMMISSIONER: I take it ~~it was~~ not
the same one he brought back, or was it, or do you
know?

9

10

THE WITNESS: I don't know. He
took one bottle and he brought back a bottle.

11

12

THE COMMISSIONER: Well, the only way
you might know is if he brought back a new one and he
had taken away an old one?

13

14

THE WITNESS: I don't know, I'm
sorry.

15

16

MR. LAMEK: Q. Well, Mrs. Trayner, I
guess if Miss Nelles' recollection is right, we may
never know what happened to that bottle of digoxin
that she left out.

17

18

19

20

Now what time did Miss Johnstone
come to do her rounds?

21

A. One o'clock, 1:30 maybe.

22

Q. That is your best recollection?

23

A. It would have to be after

24

25



CC3 1
2 12:30 because that is when she took Dr. Jedeikin
3 down to the pharmacy.

4 Q. Okay. Somewhere between
5 midnight and 12:30 Costigan and Mounstephen were
6 there doing the inventory?

7 A. Yes.

8 Q. 12:30 Jedeikin was there
9 and Miss Johnstone came and took him down to the
10 pharmacy?

11 A. Yes.

12 Q. And then sometime after
13 12:30 she came to do her rounds?

14 A. Right.

15 Q. And you went on her rounds
16 with her?

17 A. Yes.

18 Q. And you were in Room 418 as
19 well as all the other rooms?

20 A. Yes.

21 Q. Do you remember how Justin
22 Cook was at the time you saw him on rounds with Miss
23 Johnstone?

24 A. At one time he was resting
25 in bed and Susan was just beside him.

Q. Yes.



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A. The next time I saw him he was awake and Susan was holding him.

Q. Now you say the next time you saw him. Was that after Miss Johnstone had been and gone?

A. Yes.

Q. Now you were then in Room 418 and in a position to observe Justin Cook at the time that Miss Johnstone was there making her rounds and then, once again later, and I take it Miss Nelles was there on that second occasion?

A. Yes.

Q. Did you subsequently that night relieve Miss Nelles for another break?

A. Yes, I did.

Q. All right. What time was that?

A. It was after two o'clock, 2:15.

Q. Is that your best recollection, 2:15?

A. It was after -- after two o'clock because Susan had just done the vital signs on Justin Cook and he had a little bit of a temperature.

Q. And were you working from that



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sort of datum point doing the vital signs at two o'clock? You say she had just done the vital signs when you went to relieve her?

A. Well, she had completed the two o'clock vital signs for him.

Q. And you therefore place the time at about 2:15?

A. Yes.

Q. Now, Mrs. Trayner, I have this difficulty with it: You have placed the time of that break and your relieving her on different occasions at 2:00 and 2:30, but so far as I know you have not until today said 2:15.

A. Well, it is anywhere after two o'clock. I fed him at 2:30 so I had to be in the room for the 2:30 feeding.

Q. All right. You had to be in the room for the 2:30 feeding. Do you recall giving evidence at the preliminary hearing?

A. Yes.

Q. And do you recall saying there, and I can read the passage to you if you like - it is in Volume 4, Mr. Commissioner, at pages 780, 783. 783 beginning at line 15 you were asked these questions:

"Q. Now Susan you indicated took



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another break at two o'clock or thereabouts?"

"A. Yes, she did."

"Q. Do you remember the time exactly that was?"

"A. That was just before two."

"Q. Just before two? What type of a break was that?"

"A. It was going to be her dinner break."

"Q. Her dinner break?"

"A. Yes."

"Q. How long is a dinner break normally?"

"A. About half an hour to 45 minutes."

And then at other times in the ensuing pages you say it was two o'clock to 2:40. When asked when exactly that was, you said just before two.

Now what is your present recollection as to -- I take it you believed that answer to be true at the time you gave it?

A. Yes.

Q. Are you suggesting that the two o'clock vital signs were done before two o'clock?



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A. No. I believe Susan did them around two o'clock and I relieved her after that, just after her taking the vital signs.

Q. And do you believe that that was shortly before two o'clock, as you said at the preliminary hearing?

A. To the best of my knowledge I believe it to be after two that I went into the room.

Q. May I take it then that you are telling me now that the answer that you gave at the preliminary hearing when asked if you could remember the time exactly and you said just before two, you no longer believe that answer to be correct? Is that fair?

A. Yes.

Q. Now do you recall being interviewed by the Crown Attorneys in November of 1981, which would be a couple of months before the beginning of the preliminary hearing? Do you remember that?

A. Yes.

Q. Do you recall on that occasion saying to the Crown Attorneys, Mr. McGee in particular, that "I relieved Susan who was with Justin at about



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2:30. I wanted her to be back at 3:30."

3

Do you remember saying that?

4

A. No.

5

6

7

Q. And if you are reported as having said that, is it your position you are misreported? Are you able to tell me that you did not say that on November 2, 1981?

8

A. No, I can't say that.

9

10

Q. Is it possible you did say it --

11

A. Yes, it is possible.

12

Q. -- on November 2, 1981?

13

A. Yes.

14

Q. And I take it at the time you said it you believed that to be true?

15

A. Yes.

16

Q. Excuse me a moment.

17

And on March 25, 1981, do you remember being interviewed on that day?

18

A. Oh, yes.

19

20

Q. I'm sure you do. On that occasion I think you said it was about two o'clock that you relieved Miss Nelles. Do you recall that?

21

22

23

A. Well, I would have to say that day then on March 25th my memory would have to

24

25



CC9

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be much better than it is three years later.

3

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Q. I suppose so. Could I
equally suggest to you your memory in the spring of
1982 is better than it is in the spring of 1984?

5

6

A. Yes.

7

Q. Two o'clock sounds right,
does it? 2:00 or shortly thereafter?

8

9

10

11

12

13

A. I believe it to be after Susan
had done the two o'clock vital signs because he had
had a temp. I also believe it to be before 2:30
because I remember feeding him, and now it is hard
for me to say that I went in, you know, at 2:00, 2:10,
or 2:22. It was after 2:00 and before 2:30, and
that's the best that I can do.

14

15

16

17

Q. All right. It may be that the
more important question is when did Miss Nelles leave.
Did she leave immediately you went in or was she there
for a few minutes after you went in?

18

19

A. She was there for a few
minutes with me.

20

21

Q. All right. Now let's focus
on what happened when you went into the room. Miss
Nelles was there with the child?

22

23

24

25

A. Yes.

Q. Was anyone else in the room at



1
CC102 that time?

3 A. I don't know if Janet
4 Brownless was there at that moment or she came in
5 just after that.

6 Q. How was the baby?

7 A. He was crying.

8 Q. Yes.

9 A. And he was a little irritable
and he felt warm.

10 Q. May I take it from all that
11 he was awake?

12 A. Yes.

13 Q. Yes. All right. What was
14 said between you and Miss Nelles -- well, it's a
15 long time since I had anything to do with babies
I want you to know.

16 What was said between you and Miss
17 Nelles when you went into that room?

18 A. We had a little conversation
19 on whether we should feed him now --

20 Q. Yes.

21 A. -- because he was going to
22 have a clear drink at four o'clock, and should we
23 give it to him now since he was awake instead of
24 trying to settle him in our arms and then waking him
25



CC11

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up again at 4:00.

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Q. Okay. The child was to go
in for surgery the next morning, was he not?

5

A. Yes.

6

7

Q. And the order was therefore
that he should have nothing by mouth after four in
the morning?

8

A. Right.

9

10

11

Q. And therefore you would want
to make sure that he did have something before he
was cut off at four o'clock?

12

A. Right.

13

14

15

Q. Had you also been told at the
beginning of the shift or at an early stage in the
shift that the child should be disturbed as little
as possible --

16

A. Yes.

17

Q. -- that night?

18

A. Yes.

19

20

21

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Q. And was it therefore the
agreement between the two of you that since the child
was awake now at some time between 2:00 and 2:30,
it made sense to give him his feed or his drink while
he was awake rather than put him back down and then
have to disturb him later?



CC12

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A. Yes.

3

Q. All right. What were you
going to give to him?

4

5

A. Sugar water, D5W.

6

Q. D5W. And where was that
kept?

7

8

A. It was over the little
counter -- on-top over the sink.

9

10

Q. In Room --

11

A. In Room 418.

12

Q. And did one of you go and
get a bottle of that?

13

14

A. I had washed my hands and
put my gown on and I was sitting down and Susan
handed me Justin Cook and she went and got the
bottle and warmed it up and then brought it back to me.

15

16

17

Q. Okay. Now you say that was
a little conversation that you had, and I think that
was your word. From the time you went in till the
time it was decided that you would feed him now and
Miss Nelles went to get the bottle for you and give
it to you, how long elapsed?

18

19

20

21

A. About five minutes.

22

23

Q. Right. And then you began
to feed him?

24

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CC13

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A. Yes.

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Q. And that is the feeding I
take it that is described in the chart as the 2:30
feeding?

5

A. Yes.

6

7

Q. And was that approximately
the time at which you began to feed him?

8

A. Yes.

9

10

11

12

13

Q. Does it therefore follow
that you went into that room on your own evidence
at about 2:25? If you began to feed him at 2:30
following a five-minute conversation which took
place after you went into the room, is it fair to
suggest you went into the room at about 2:25?

14

A. Well --

15

Q. 2:20 perhaps?

16

A. It is fair to suggest, yes.

17

18

19

Q. And you wouldn't -- I take
it you are not really in a position to argue with it
because you are not exactly sure when you went in
there?

20

A. No, I am not.

21

22

23

24

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Q. And we have really reconstructed
it from your own recollection of what happened once
you got there, have we not?



CC14

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A. Yes.

3

Q. And you began to feed the

4

child the sugar water?

5

A. Yes.

6

Q. And did Miss Nelles then

leave?

7

A. Yes.

8

Q. She was going off for what I

9

understand is called a lunch break or dinner break

10

or something of that sort and she was going to be

11

away for what, about 45 minutes?

12

A. About a half hour, 45 minutes,

13

yes.

14

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Q All right. Now, I remind you again that in November of 1981 when you said to the Crown Attorneys was that she left at 2:30 and you didn't want to see her back until 3:30. Was it an hour break or half hour break, what's your recollection?

A I thought Susan was back just shortly after 3 o'clock.

Q For how long did you expect her to be away?

A Over a half an hour.

Q Okay. Up to an hour?

A No, about 45 minutes at the most.

Q All right. And therefore she left at 2:30, you would expect her back at around 3:15?

A Right.

Q All right. And you went ahead with the feeding of Justin Cook?

A Right.

Q And that was just a 4-ounce bottle you had, was it not?

A Yes.

Q All right. What happened, can you tell us what occurred in the space of time while she was away on her break?

A Justin drank really the first



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half of it and then he had fallen asleep in my arms
and then I tried to put him down into the bed and
tried to cover him up and he woke up crying.

Q. Yes.

A. Susan came into the room and
over to the bedside where I was and asked what was
wrong? I told her that he had fallen asleep drinking
and I was trying to settle him but he woke up and we
decided to complete the feeding.

Q. I'm sorry, did she then leave
or did she stay?

A. She just left after I had him
in my arms again.

Q. All right, thank you.

A. And then Justin finished drinking
the rest of the water and fell asleep in my arms.

Q. And did you then put him back
into the crib?

A. No, I was afraid he was going to
wake up.

Q. All right. So, you continued to
hold him. The last time you tried that he woke up
again?

A. Yes.

Q. All right. So, you continued to



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hold him. Did Miss Nelles come back into the room
during her break?

3

4

A. Yes, she did.

5

Q. How many times?

6

A. She came back that one time.

7

Q. Yes, when the baby cried. Did
she come back again before the end of her break?

8

A. Yes, she came back to see if he
was taking the water.

10

Q. And by that time was he still
feeding or had he now fallen asleep again?

11

12

A. He was dozing off.

13

Q. All right. And did she stay in
the room that time longer than it took to go and ask
the question and receive the answer?

14

15

A. No, she just came over to see
if everything was fine and then left.

16

17

Q. And then she went back out again
to continue her break?

18

19

A. Yes.

20

Q. And you stayed with the child?

21

A. Yes.

22

Q. Throughout that break from the
time that she left at about 2:30 until the time that
she came back, and we will try to get to that in a

23

24

25



DD.4

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2

moment, did you remain with Justin Cook throughout
that period?

3

4

A. Yes, I did.

5

Q. Right beside him?

6

A. Yes.

7

Q. Indeed, holding him for much of
the time as I understand you?

8

A. Yes.

9

Q. Right. What time did she return
from her break?

10

11

A. I believe it to be shortly after
3 o'clock.

12

13

Q. And did you immediately leave?

14

A. I put Justin back into his bed.

15

Q. Yes. Did he settle?

16

A. Yes, he did.

17

Q. All right. And then you left?

18

A. Yes.

19

Q. And you went out to the nursing
station?

20

A. Yes.

21

Q. And into the back of the nursing
station?

22

A. Yes.

23

Q. Who was there when you got there?

24

25



DD.5

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A. Lynn Johnstone was there, Bertha Bell and when Sue had come in from her break she told me that Lynn was out there and they wanted me to go over the assignments.

Q. And for how long did you stay at the nursing station there with Mrs. Johnstone?

A. I thought it to be about 20 minutes because we were negotiating, Bertha and myself and Lynn Johnstone, about getting relief up.

Q. About what?

A. Getting relief.

Q. Okay, yes.

A. Tomorrow.

Q. And then what happened?

A. And then shortly after 3:30, about 25 to 4 I think, Susan called me and when I came to the door Susan says "Does Justin look bluer to you?" As I approached the bedside Bertha Bell was following me along with Lynn Johnstone and Janet Brownless was there and Susan was feeding another baby for Janet Brownless and Janet came in and took the baby away from Susan at that time.

Q. All right.

A. And we were all at the bedside.

Q. Now, you think you were about 20



DD.6

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2

minutes with Mrs. Johnstone when you heard Susan
call out?

3

4

A. Yes.

5

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Q. All right. Now, can we look at
the chart for a moment and, in particular at the
nursing notes. Page 28 we have Miss Nelles' note
half way down the page, from March 21, 7 p.m. until
3 a.m.; over the page on page 29, March 22/81 baby
settled well after 2:30 feeding, rested comfortably
until about 3:45 when hands were noted to be more
cyanosed.

12

13

14

Now, was that what it was that
apparently caused Miss Nelles to call out because you
said she asked you whether he looked bluer to you?

15

16

17

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A. Right.

Q. And that was her first question
to you when you went into the room?

A. Yes.

Q. I take it one can reasonably
infer then that the observation of apparently greater
cyanosis, which she records as having happened at
about 3:45 was what prompted the call to you?

A. Yes.

Q. All right. Now, if that was at
3:45, and I don't hold you I promise you to your



DD.7

1

2

estimate of 20 minutes with Mrs. Johnstone, it may
have been 15, it may have been 30 for all I know?

4

A. Yes.

5

6

Q. But did that assist you in fixing
the time a little more closely as to when Miss Nelles
returned from her break?

7

8

A. Well, it was after 3, about 3:15
maybe then.

9

10

11

Q. And perhaps you were up to a
half an hour with Mrs. Johnstone. It is hard to know
exactly how much time passes, I understand?

12

A. Yes.

13

14

15

16

Q. Do you recall however being
examined at the preliminary hearing about the time of
Miss Nelles' return? At page 788, sir, in Volume 4
you were being asked about this second break,
beginning at line 11, sir:

17

18

"Q. So, he finished the bottle and
then what happened?

19

20

21

22

"A. Then I cuddled him in my arms
for a few minutes, just held him in my
arms and then I put him down on his
back, gave him a soother."

23

24

25

And that was a term that was obviously
unfamiliar to his Honour:



DD.8

1

2

"You gave him what?

3

"A. Gave him a soother. I don't

4

know what the other word is for it -

5

pacifier - and put the oxygen hood on

6

him and I sat there until Susan came

7

back in.

8

"MR. MCGEE: What time would that
have been?

9

"A. That was about another 10 to 15
minutes before she actually came in
to stay.

10

11

12

"Q. So, that would have been, what,
2:40, 2:45?

13

14

"A. Approximately, yes."

15

Now, as I read that evidence you were
putting her return at something like a quarter to
three rather than a quarter past three?

16

17

A. Hm-mm.

18

Q. Do I correctly read that evidence
and understand what you were saying?

19

20

A. Do I mean that that was half
way through, because she did come into the room at
about a quarter to.

21

22

Q. No, I think that refers to her
return at the end of the break. Remember, at this

23

24

25



DD.9

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time you thought you would relieve her at about
2 o'clock?

A. Okay.

Q. All right. Do I take it on the
way in which we have reconstructed this today that
your evidence today that she came back more like 3:15
than 2:45 is the more reliable recollection?

A. Okay.

MR. STRATHY: Just if I may, Mr.
Commissioner. I am looking at the transcript and
perhaps it is ambiguous but the answer that Mrs.
Trayner gave at the preliminary was:

"That was another 10 to 15 minutes
before she actually came in to stay.

"Q. So, that would have been, what,
2:40, 2:45."

So, I take it that she actually came
in to stay, that is, Miss Nelles, around 2:50 or 2:55
or 3 o'clock, that's how I read that.

MR. LAMEK: Well, no point arguing
about it I suppose except, as I said to you earlier,
Mrs. Trayner, you thought at the preliminary the
break was from 2 to 2:40, you will remember?

THE WITNESS: Yes.

MR. LAMEK: Q. And therefore approximately



DD.10

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2:40/2:45 would seem to indicate the time of
Miss Nelles' return as you then remembered it?

A. Yes.

Q. Is that fair?

A. Yes.

Q. And as you have considered it
today with me, it seems to have been more likely at
about 3:15. Is that fair?

A. That's fair.

Q. Okay. And indeed just to resolve
my friend Mr. Strathy's concern. At page 790 you
were asked, line 15:

"Q. Now, after you went out of the
room what did you do? This would be
around 2:45 I take it in the morning.

"A. I just finished telling you I
spoke to the supervisor."

So, it appears as you then understood
it you left the room at 2:45 and today we have
considered that anew and it looks more like 3:15, is
that fair?

A. Yes.

Q. A time to which it is now getting
very close.

Now, you heard Miss Nelles call out



DD.11

1

2

and from the chart it would appear that was about

3

3:45?

4

A. Right.

5

Q. And you went in, she said, does

6

Justin look bluer to you?

7

A. Yes.

8

Q. She was holding another baby, a

child, a patient of Miss Brownless?

9

A. Yes.

10

Q. And did you look at Justin Cook?

11

A. Yes.

12

Q. And did he indeed appear to you

13

to be more cyanosed than when you had left him?

14

A. Yes.

15

Q. And what happened, what did you do?

16

A. We put a call, a Code 23 in for

Dr. Kantak.

17

Q. Yes.

18

A. And Dr. Kantak came to the floor.

19

Q. And Miss Brownless I take it

20

took the child that Miss Nelles was holding, took him
away so she could deal with Cook?

21

A. Right.

22

Q. All right. And Dr. Kantak came

23

to the floor?

24

25



DD.12

1

2

A. Yes.

3

Q. Who else was at Cook's bedside

4

in the period while you were awaiting Dr. Kantak's
arrival?

5

A. Susan Nelles.

6

Q. Yes.

7

A. Bertha Bell.

8

Q. Yes.

9

A. Myself and Lynn Johnstone.

10

Q. All right. Lynn Johnstone came

11

in to Room 418 with you, did she?

12

A. Yes.

13

Q. And had Bertha Bell been out at

14

the back of the nursing station as well?

15

A. Yes.

16

Q. All right. So, there are the

17

four of you at the bedside and Miss Brownless is
there as well I take it?

18

A. Yes.

19

Q. Do you know where Mrs. Christie

20

was?

21

A. No.

22

Q. All right. Incidentally, do you

23

know where Miss Brownless and Mrs. Christie had been
while you were relieving Susan Nelles?

24

25



DD.13

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A. I can recall both of them being
in the room.

Q. Throughout the time?

A. One was, yes.

Q. Do you remember which one?

A. Janet Brownless was in, she had
started doing vital signs and started to feed one
of her babies.

Q. Yes.

A. And Mrs. Christie had done vital
signs on her child there.

Q. Okay. But was either of them
there throughout the time that you were there on the
break? I'm not quite sure what you are telling me,
that one of them was there throughout or that at all
times one or the other was there?

A. No, I recall both of them being
there but I recall Janet Brownless being there more
than Mrs. Christie.

Q. Okay. Do you know whether she
was there, do you recall whether she was there
throughout the 45 minutes or whatever it was that you
were there?

A. I thought she was because there
was a movie on TV.



DD.14

1

2

Q. Okay.

3

A. And Janet was looking at it.

4

Q. So, it is your belief, it is your thought that she was there throughout the time that you were relieving Miss Nelles? I want to be fair, can you be positive of that? I want you to be as clear as you can as to how good your recollection is.

5

6

7

8

A. I can't say positively that Janet was beside me every minute in the room at all times.

10

11

Q. Okay.

12

A. I can recall her being there, I can remember her bringing her cup of tea in.

13

14

Q. Right.

15

A. And I can remember her sitting down with the baby for a few minutes watching the TV.

16

17

Q. Okay.

18

A. Also, I can see her doing vital signs on another infant in the room.

19

20

Q. Okay. I take it if you can remember her bringing her cup of tea in you can remember before she did that she wasn't there?

21

22

A. Right.

23

Q. Is that fair?

24

A. Yes.

25



DD.15

1

2

3

Q. So, there was at least that
period when she wasn't there?

4

A. Yes.

5

Q. And there may have been others,
is that fair?

6

A. Okay.

7

Q. Okay.

8

It is now that magic hour, may we take
a short break?

9

10

THE COMMISSIONER: Yes, all right.

11

--- Short recess.

12

13

14

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EE
DM/cr

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---On resuming.

3

THE COMMISSIONER: Yes, Mr. Lamek.

4

MR. LAMEK: Thank you, Mr. Commissioner.

5

Q. Mrs. Trayner, on the question

6

of the timing of that break about which we have had

7

conversation, may I take it at least that from the

8

time that Miss Nelles came back, whatever time that

9

was, and I know the way we have worked it out today,

10

whatever time that was, you left the room and went

11

to the nursing station and were talking to Mrs.

12

Johnstone, is that right?

13

A. Yes.

14

Q. And you stayed with Mrs.

Johnstone until you heard Miss Nelles call out and

15

then you went into the room?

16

A. Yes.

17

Q. And from the time you left

18

upon Susan's return, whatever time that was, until

19

the time she called and you went back into the room,

20

do I understand you yourself were not back in Room

21

418?

A. No, I wasn't.

22

Q. You were out at the nursing

23

station with Mrs. Johnstone?

24

A. Yes.

25



1

2

2

Q. Now as far as the timing of

3

that break is concerned, I think it proper also

4

to remind you that you prepared some notes with

5

respect to the Cook death, did you not?

6

A. Yes.

7

Q. Do you remember when you

prepared those?

8

A. It was the afternoon after

9

the Police Officers had left on March the 25th.

10

Q. On March the 25th. I think

11

fairly on that occasion writing those notes, you

12

said that it was at 2 o'clock that you took your

13

coffee into Room 418 to relieve Sue, do you recall

having made that in your notes at that time?

14

A. Yes.

15

Q. I recognize that was a matter

16

of three or four days after the events, and we have

17

really set about the thing working backwards from

18

the 2:30 time today; are you able to tell me whether

19

when you wrote your notes you were relying on your

20

recollection, which I agree was still fresh, or

21

were you working there around sort of mile posts,

22

what I call like the 2:30 feeding, the 3:45 call for

23

help and so on. Were you just trying to place the

24

time in your mind, or were you also referring to other

25



1

2

events whose time can be fixed?

3

A. No, I was taking that from what
I remembered on the night.

4

5

6

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8

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10

11

Q. Is it fair therefore to say
that notwithstanding that was your first recollection,
three or four days after the event, that if we try
to time things by reference to known datum points like
the 2:30 feeding, and the time of the call for help,
when the baby was noticed to be more cyanosed, we
come to rather different times for that break as we
have today?

12

A. Yes.

13

14

15

16

Q. Now on March the 25th, however,
when you did speak to the Police, do you remember
telling them that you went back in to Room 418 at
about 3 o'clock to see if Susan Nelles had settled
Justin Cook; do you remember that?

17

A. Not really, no.

18

19

Q. Let me try to direct you to
it.

20

MR. PERCIVAL: 207, page 13 in the
statement.

21

22

23

24

25

MR. LAMEK: Page 13 in the statement,
thank you. Oh, you are looking at the handwritten
statement; page 9 of the typed version of it, thank



1

2

you. Do you recall saying:

3

"She went and got the bottle to feed

4

him and then she left..."

5

We are obviously referring to the second break are

6

we not:

7

"He took the bottle quite well and fell

8

asleep half-way through it. Janet came

9

in to see if I wanted relief."

10

A. Right.

11

Q. Although you yourself were on

12

relief at the time I think, you were relieving Susan,
is that right?

13

A. Yes.

14

Q. "I went to put him down on the

15

bed and he cried, Susan came in to see

16

what was going on and I told her what

17

had happened..."

18

Which is what you have told us today:

19

"He cried and cried and I picked him

20

up and I held him in my arms and I gave

21

him a bottle which he finished. A

22

couple of the girls came in from 4B just

23

to look at the kids, Yvonne Lyons and

24

Susan Reaper..."

25

Now, we haven't mentioned that today. Do you now



1
2 have a recollection of their coming in while you were
3 relieving Miss Nelles?

4 A. Yes.

5 Q. And how long did they stay?

6 A. They were just in for a few
7 minutes.

8 Q. "He was hard to settle for a
9 few minutes I left the room..."

10 I am sorry:

11 "I had Justin in my arms, Sue came in and
12 we decided to put him back in the bed.
13 He was hard to settle for a few minutes
14 I left the room."

15 Is that your recollection of how that
16 break of Miss Nelles ended?

17 A. Yes.

18 Q. All right.

19 "She came back and we decided to put
20 him back in the bed. He didn't settle
21 immediately..."

22 And you left. Then you go on:

23 "Mrs. Johnstone the supervisor was up
24 having coffee. I then went back into
25 Room 418, this was about 0300 to see
if Sue had Justin settled and she did.



1
2 "I went back out to have my coffee.

3 Mrs. Johnstone informed me Justin was
4 going to the operating room in the late
5 afternoon."

6 Does it appear from that that on March
7 the 25th you thought, that having left Miss Nelles
8 in the room at the end of her break, and having gone
9 out to see Mrs. Johnstone, you then did go back into
Room 418 to see if Susan had settled Justin?

10 A. I didn't go into the room. I
11 made a quick round on 4A and I was at the door just to
12 see if Sue had settled him.

13 Q. All right. So as I now under-
14 stand it, and you place that at about 3 o'clock,
15 that I take it was in the context of that impression
that the break had ended at about 20 to 3?

16 A. Right.

17 Q. Do I have it now then that
18 whatever time that break ended, you went out, and
19 sat with Mrs. Johnstone and you thought about 20
20 minutes, and in the course of that 20 minutes you
made that quick round?

21 A. Right.

22 Q. So in fact you were not talking
23 to Mrs. Johnstone continuously for that period from
24
25



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the time you left 418 until Miss Nelles called for help. You did leave to go a quick round and look at the children?

A. Yes.

Q. You didn't go into the room you say, but you looked from the door to see if she had him settled?

A. Yes.

Q. Did you speak to Miss Nelles on that occasion?

A. Yes.

Q. Do you remember what was said?

A. Just "So has he settled".

Q. All right.

A. And I was still walking down the hall and she was saying "Yes".

Q. On the timing as we have put it together today, Mrs. Trayner, do I understand then that the probability is that Susan went back to 418 at about 3:15 and you left?

A. Yes.

Q. You went out and sat with Mrs. Johnstone for a while?

A. Yes.

Q. You then left the nursing station,



1
2 you did a quick tour of your ward, including a stop
3 at the door of 418 and a very brief conversation with
4 Miss Nelles, is that right?

5 A. Yes.

6 Q. You then went back to the back
7 of the nursing station with Mrs. Johnstone and were
8 with her when at about 3:45 Miss Nelles called out?

9 A. Yes.

10 Q. Now, we were at the stage I
11 think where Dr. Kantak had been summonsed, a Code
12 23 for Dr. Kantak?

13 A. Right.

14 Q. And what were you doing in the
15 period before Dr. Kantak arrived?

16 A. I was doing some vital signs
17 on Justin Cook, trying to get the blood pressure and
18 his respirations.

19 Q. In that regard, would you look
20 at page 66 of the chart, and you will see there, Mrs.
21 Trayner, that pulse and respiration were taken at
22 8 o'clock, as also his temperature and blood pressure
23 at 8. Pulse and respiration at 9, 10, at 11; then
24 at 11:50, and then at 1 o'clock. I wonder if you
25 can tell me first if you know why there were
two pulses, two respirations within 10 minutes of



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each other there? I am sorry, yes - no, that
is the midnight signs isn't it taken 10 minutes
early?

A. Yes.

Q. Thank you. But there are no
pulse and respiration at 3 o'clock, it goes 0100,
0200, 0345, and we know 0345 was when the child was
beginning to get into trouble?

A. Hm-mm.

Q. While you were in the room
with Justin Cook on that break for Susan Nelles,
did you take any vital signs?

A. I don't recall that I did,
no.

Q. And that might account for the
gap at 3 o'clock, might it?

A. It may have.

Q. I am sorry, so you were trying
to take vital signs while you were awaiting the arrival
of Dr. Kantak. Are those the vital signs that are
recorded 0345 that you took?

A. No, that is not my writing.

Q. Could you have taken them and
someone else recorded them at your dictation, if you
had said pulse 125, could someone have written it down?



1

2

A. They might have, yes.

3

4

Q. Because 0345 was not the normal time to record pulse, respiration and blood pressure, was it?

5

6

A. No.

7

8

Q. But it was the time that the child was getting into trouble and you were there looking and deciding to call Dr. Kantak?

9

A. Yes.

10

11

Q. And your recollection is you were taking some vital signs, do you know what the others were doing, Bell, Johnstone and Nelles?

12

13

A. Sue was on the side of the door getting oxygen ready for him.

14

Q. Yes.

15

A. And Lynne Johnstone and Bertha Bell were just at the foot of the bed.

16

17

Q. At some stage was the crash cart brought into Room 418?

18

A. Yes.

19

Q. By whom and when?

20

A. I believe it to be from Lynne Johnstone after Dr. Kantak had arrived.

21

22

Q. Oh, all right. So Dr. Kantak arrived and what did he do?

23

A. He examined the baby and gave

24

25



1
2 Justin some Inderal that was taped to the bedside,
3 the syringe.

4 Q. He administered Inderal from
5 one of the syringes that was taped to the bed?

6 A. Yes.

7 Q. And then what?

8 A. Then he asked --

9 Q. If it would be of assistance to
10 you to look at the chart if it refreshes your memory
11 by all means do, I think the note is on page 29.
12 Starting from the beginning of that note, Mrs. Trayner,
13 it says:

14 "... until about 3:45 when the hands
15 were noted to be more cyanosed and
16 oxygen was increased to one hundred
17 percent. Vital signs were started
18 when the baby began to have a seizure,
19 there was arching of the back and
20 generalized rigidity lasting for 30 to
21 45 seconds."

22 Were you there when that occurred?

23 A. Yes.

24 Q. Does this accurately record
25 what you observed?

A. Yes.



1

2

Q. "Vital signs at this time
were ..."

3

4

As set out in the flow sheet I believe:

5

"A 23 was placed for Dr. Kantak..."

6

And you have told me about that:

7

"...who arrived a minute or so later..."

8

He came very quickly?

9

A. Yes.

10

Q. "On his arrival propranolol
was administered..."

11

And that you have told me was one of the syringes at
the foot of the bed?

12

A. Right.

13

14

Q. Now again by reference to the
note if you can, or by recollection if you have a
clear recollection, what then occurred?

15

16

A. I can remember Dr. Kantak

17

asking the two of us, Susan and myself "He looks

18

better doesn't he?". And Susan looking at me and

19

shaking her head; and Lynne Johnstone saying "No

20

I don't think he does". And Susan said: "No he looks
worse".

21

Q. What was your impression?

22

A. He didn't look very good after

23

the Inderal, there wasn't much improvement at all.

24

25



1

13

2

Q. All right.

3

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A. I think that was when Lynne Johnstone had gone out and brought in the crash cart to see if they needed any medications from that. He waited for a few more minutes and then he gave another dose of the Inderal. I don't know if it was from the same syringe or the other syringe, but he gave some more Inderal to the baby.

Q. Do you recall Dr. Kantak talking by telephone to anyone during that period?

A. He phoned Dr. Jedeikin, and I thought he had called Dr. Jedeikin after he gave the second dose of Inderal.

Q. You think after the second dose, all right.

A. And Dr. Jedeikin informed him to give Justin some morphine and to give him the morphine now and to phone Dr. Jedeikin back in a minute.

Q. And was morphine given?

A. Yes.

Q. Where did the morphine come from?

A. I don't know.

Q. Do you know who obtained it,



14

1

2

who brought it?

3

A. It was I think Lynne Johnstone

4

or Bertha Bell, I don't remember.

5

Q. You are sure it wasn't yourself?

6

A. No, I was at the side of the

bed at the time.

7

Q. And where was Miss Nelles?

8

A. She was on the other side.

9

Q. So one of the others must have

10

obtained morphine from somewhere?

11

A. Yes.

12

Q. And that was administered by

Dr. Kantak?

13

A. Yes.

14

Q. And then what happened?

15

A. He didn't look, Justin didn't

16

look any better after the morphine and during this

17

time Lynne had said I think we had better call ICU,

18

the Intensive Care Unit to get the baby down to the

19

Intensive Care Unit. Dr. Kantak said that no, he would

20

be fine and that he would call Dr. Jedeikin back,

21

or Dr. Jedeikin would be coming in. I can recall

Lynne Johnstone being very agitated by saying:

22

"Look, someone has to take charge here. I am going

23

to call the ICU." I remember her leaving the room

24

25



1
15 2 to go and use the phone and within a second she was
3 back saying Dr. Jedeikin is running up the hall.

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Q. All right. Did he then
come into the room?

A. Yes, he did.

Q. And what happened when he
arrived?

A. He did a quick examination
of the baby. He asked Susan what had happened; asked
Dr. Kantak what the results were from the Inderal
and from the morphine, and made arrangements for the
baby to be taken down to Intensive Care Unit.

Q. Did he himself speak to the
Intensive Care Unit by telephone?

A. Yes.

Q. All right.

A. And at that time he had
called for a -- I thought he had called for an
anaesthetist because they were planning on intubating
Justin Cook on the floor and then taking him down
to the Intensive Care Unit.

Q. Yes. Did an anaesthetist
arrive?

A. Pardon me?

Q. Did an anaesthetist arrive?

A. I can recall the anaesthetist
coming.



1
FF2 2 Q. Yes.
3 A. And just got to the -- to
4 my side of the bed when Dr. Jedeikin said "What is
5 his heart rate doing?" because he, Dr. Jedeikin,
6 was beside Susan and the cardiac monitor was beside
7 me.
8 Q. Yes.
9 A. He could see the monitor,
10 I couldn't.
11 Q. Yes.
12 A. And I listened with my
13 stethoscope and I said, "I can't hear anything", and
14 Dr. Jedeikin started CPR on the baby.
15 Q. All right. Was the monitor
16 showing any heart beat?
17 A. My back was to the back of
18 it and I really can't see what it was showing.
19 Q. So Dr. Jedeikin started CPR?
20 A. Yes.
21 Q. And was a Code called at that
22 time?
23 A. Yes.
24 Q. And the arrest team arrived
25 and resuscitation effort ensued?
A. Yes.



FF3

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Q. And as we know Justin Cook
died at 4:56 in the morning.

A. Yes.

Q. Following the child's having
been pronounced dead, what did you do?

A. What did I do?

Q. Yes. What did you do?

A. I think I went out to the
desk.

Q. Yes.

A. I don't know what I did the
exact minute there.

Q. Did you leave the others in
Room 418?

A. I guess -- I don't know.

Q. All right.

A. I may have walked out with
Bertha and gone in and got some water.

Q. And we know from Miss Johnstone
that she left before the child was pronounced dead.
Do you recall that?

A. I don't recall when she left.

Q. All right.

A. I know she did leave.

Q. She did leave and you recall



1
FF4 2 that Miss Coulson was there?
3 A. Yes.
4 Q. All right. When you left
5 the room, do you recall whether Miss Nelles stayed
6 in the room?
7 A. Yes, she did.
8 Q. And Miss Coulson?
9 A. I can't remember Kathy Coulson,
10 no.
11 Q. All right. What about the
12 physicians? Was Kantak there throughout the
13 resuscitation effort?
14 A. I thought Dr. Kantak had
15 left the room.
16 Q. All right.
17 A. And Dr. Jedeikin had left and
18 was on the phone with Dr. Fowler.
19 Q. All right. That was after the
20 child had died?
21 A. Yes.
22 Q. All right. And the arrest
23 team left, I take it?
24 A. Yes.
25 Q. What is the normal procedure
following a resuscitation effort? We know it wasn't



1
FF5 2 followed that night, but what did you normally do
3 after a resuscitation effort after the child had
4 died? What was the drill?

5 A. There would be a clean-up --
6 well, not committee, but people would pitch in and
7 clean up the room --

8 Q. All right.

9 A. -- straighten things around.
10 Someone would bathe the baby and prepare the baby for
11 the parents if they were coming in.

12 Q. Right.

13 A. And then the nurse that was
14 with the baby would prepare the notes.

15 Q. Okay. Now I take it that
16 there was normally a few minutes pause while every-
17 body gets over the upset of the resuscitation effort
18 having failed and so on, and then what you have
19 described begins to take place, does it?

20 A. Right.

21 Q. Now it didn't take place
22 that morning, did it?

23 A. No, it didn't.

24 Q. What happened?

25 A. Dr. Jedeikin was on the
phone with Dr. Fowler and the clean-up had started, I



FF6

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think. Janet Brownless had come in and was picking up stuff and starting to put them into the green garbage bags that we have, and Dr. Jedeikin came in and said, "Leave everything alone. Leave everything as it is."

Q. Where were you at that time?

A. I think I was either going into the room just ahead of Dr. Jedeikin or just after him.

Q. All right. Had Dr. Jedeikin made his telephone call from the nursing station?

A. Yes.

Q. And had you been at the nursing station at the time?

A. Yes.

Q. Was it Dr. Fowler that he had called?

A. I believe it to be, yes.

Q. I don't suggest for a moment you were eavesdropping but did you hear what he said to Dr. Fowler?

A. The cardiologists are called during the arrest attempt and then they are called after. I knew he had called Dr. Fowler during the -- Justin's arrest.



1
FF7 2 Q. Yes.
3 A. And I assumed it to be Dr.
4 Fowler that he called after to say it was unsucces-
5 ful.
6 Q. Was that all you heard him
7 say, or did you hear him say anything?
8 A. I didn't really hear anything.
9 I just knew that he was talking to somebody.
10 Q. Okay. And then Jedeikin went
11 back into 418 and you were there at about the same
12 time that he went into the room and he told them
13 to stop the clean-up and to leave everything as it
14 was?
15 A. Yes.
16 Q. All right. Did the nurses
17 then leave the room?
18 A. I think they did. I can
19 recall Bertha and myself sitting at the front of
20 the nursing desk and Susan behind the nursing desk
21 writing up the notes.
22 Q. Did Dr. Jedeikin go into
23 Room 418 when the others left?
24 A. Yes, he did.
25 Q. Do you know what he was doing
in there?



FF8

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A. He was in there for a minute and then he came back out to talk to Susan and I could hear him saying, "Let's sit down and can you tell me what had happened?"

Q. Yes.

A. And that took I thought about probably close to ten minutes.

Q. Yes.

A. That they were discussing. By that time Dr. Fowler was on the floor.

Q. Did Dr. Jedeikin say anything to you about Justin Cook or his death or anything at all that you can now remember?

A. He came up to me when I was at the back of the nursing desk and this was after he had spoken to Susan and he said that, "I have just spoken to Susan and I just told her the same thing I am going to tell you, that nothing you had done caused Justin to die. He received excellent care. I told Susan and I just want you to know as well."

Q. Okay. Now you say by this time Dr. Fowler was on the floor?

A. Yes.

Q. Was that an unusual thing for a staff cardiologist to arrive following an arrest?



FF9

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A. Yes, it was.

Q. What happened then?

A. Then I can remember Janet
Brownless coming out and asking me for some syringes
for Dr. Jedeikin.

—



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FF2.1

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Q. Coming out of where?

3

A. Out of 418.

4

Q. Was Dr. Jedeikin back in

5

418 at that time?

6

A. Both Dr. Jedeikin and Dr.

Fowler went into Room 418 by themselves.

7

Q. And was Janet Browneless in

8

there with them?

9

A. She went in after Dr. Jedeikin

10

and Dr. Fowler.

11

Q. She came out and asked you

12

for some syringes?

13

A. Yes.

14

Q. Did you understand that to be

a request of Dr. Jedeikin or Dr. Fowler?

15

A. She just said Dr. Jedeikin

16

wants some syringes.

17

Q. Did she tell you how many

18

syringes or what size he wanted?

19

A. She probably did, but I can't

remember now.

20

Q. That is something you would

21

need to know, I take it?

22

A. Yes.

23

Q. Did you know what he wanted

24

25



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FF2.2 2 them for?
3 A. No.
4 Q. All right. You obtained
5 the syringes and you gave them, what, to Miss
6 Brownless or did you take them into the room yourself?
7 A. I gave them to Janet.
8 Q. All right. And she took them
9 into Room 418?
10 A. Yes.
11 Q. Did you subsequently learn
12 what the syringes had been required for?
13 A. When I had gone in, Dr.
14 Jedeikin was taking samples. He had already had
15 some -- there were syringes in the room before and
16 he was taking some samples from the IV tubing.
17 Q. Okay. Did you take the
18 syringes into the room to give to Janet Brownless?
19 A. No. I gave them to Janet
20 Brownless.
21 Q. Outside the room?
22 A. Yes. At the clean utility
23 room.
24 Q. Right.
25 A. I got them for her.
Q. She took them into Room 418.



FF2.3

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At what stage and for what purpose did you go into
Room 418 and see Dr. Jedeikin taking samples?

A. I went in just shortly after
that to see what they wanted ~~the~~ syringes for.

Q. Yes.

A. I had asked Janet and she
said, I don't know. They just asked me to get them.

Q. So you went in to find out,
and what did you see?

A. That Dr. Jedeikin was taking
some samples from the IV bags and the tubing. They
were already in the green garbage bags.

Q. The tubing was in the green
garbage bag?

A. Yes.

Q. All right. Did you see him
taking any blood samples from the body of Justin
Cook?

A. No. I can't remember that
today.

Q. All right. Did you at some
stage learn that he had taken blood from the body of
Justin Cook?

A. I recall that he wanted some
needles, intercardiac needles.



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FF2.4 2

Q. All right.

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A. That I had to get, and it was to take blood, but today I can't -- I can't recall being there or knowing that he took it.

6

Q. But it was your understanding he was drawing blood from Justin Cook?

7

A. Mm-hmm.

8

Q. Was that an unusual thing?

9

A. Yes.

10

11

12

Q. Did it cause you any concern or worry that blood was being taken from Justin Cook after his death?

13

14

A. I can't remember him taking the blood, but I was concerned that all this was happening and we didn't know why.

15

16

17

Q. All right. Did Dr. Fowler stay in Room 418 with Dr. Jedeikin and the body of Justin Cook?

18

A. Yes.

19

20

Q. Did he at some stage come out to the nursing station?

21

A. I can remember him walking around the nursing station.

22

23

24

25

Q. Do you remember whether he or Dr. Jedeikin made any further telephone calls that



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FF2.52

morning?

3

A. He made a phone call at the
back of the nursing --

4

5

Q. I'm sorry, who is "he"?

6

A. Dr. Fowler.

7

8

Q. Dr. Fowler, yes, he made a
call at the back of the nursing station?

9

A. Yes.

10

Q. Do you know to whom?

11

A. It was to a biochemist. I
don't know his name.

12

13

Q. One of the Hospital bio-
chemists?

14

A. Yes.

15

16

Q. That at least is what you
understood?

17

A. Yes.

18

19

Q. And were you able to hear any
of the conversation - I am not suggesting you were
trying to, but did you hear any of the conversation?

20

A. Yes.

21

22

Q. What did you hear Dr. Fowler
say?

23

24

A. That he wanted this bio-
chemist down at the Hospital now.

25

25



1
FF2.6 2 Q. Approximately what time was
3 that?
4 A. 5:30, quarter to six.
5 Q. Dr. Fowler was calling a
6 biochemist to come to the Hospital between 5:30 and
7 six o'clock on a Sunday morning?
8 A. Right.
9 Q. Was that unusual as far as
10 you knew?
11 A. They don't work on Sundays,
12 yes.
13 Q. I take it the answer is, yes,
14 that was a bit unusual?
15 A. Yes.
16 Q. Well, at that stage if I may
17 say so, Mrs. Trayner, had there not been a whole
18 series of unusual events on the floor that shift?
19 A. Yes, there was.
20 Q. You had started out with a
21 delay in administration of the nine o'clock dig.
22 doses?
23 A. Yes.
24 Q. And that itself was unusual.
25 They were checking the concentration of the material
they told you?



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FF2.7 2

A. Right.

3

Q. Then there was the order that came down via Dr. Costigan that dig. was to be not only double-checked as always but now double-signed and locked up, and that was unusual?

5

6

A. Right.

7

8

Q. And then we find a staff cardiologist, senior staff cardiologist on the floor following an unsuccessful arrest, and that was unusual you have told us?

10

11

A. Right.

12

13

Q. And then there was the drawing of post mortem blood from Cook, and that was unusual?

14

A. Right.

15

16

Q. And last of all we have Fowler on the telephone at 5:30, six o'clock in the morning, saying to a biochemist, "Get here now"?

17

18

A. Yes.

19

Q. And that was unusual?

20

A. Yes.

21

Q. What was your reaction to that series of very strange events that night?

22

23

A. I can recall asking Dr. Jedeikin what was going on.

24

25



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FF2.8 2

Q. Yes.

3

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A. And he, it was like he was
pacifying me. He tapped me on the shoulder and
said, "Nothing. Everything was fine."

5

6

Q. Clearly you did not believe
that?

7

8

A. No. What he was saying and
what he was doing were contradicting each other.

9

10

Q. Yes.

A. It was a little odd.

11

12

Q. I take it it was clear to
you that something was going on?

13

A. Yes.

14

15

Q. And it was something of a
kind that you had never encountered before in the
Hospital, was it not?

16

A. Right.

17

18

Q. Did anything occur to you
as an explanation for what was happening?

19

20

A. I didn't have any explanation.
I wondered, but I couldn't come up with any reason
as to what was going on.

21

22

Q. Nothing at all occurred to you
as a possible explanation for all of that?

23

24

25

A. No.



1
F2.9 2 Q. Did you talk to any of the
3 other nurses on the floor about those events any time
4 from 5:30, 5:45, six o'clock, the rest of the shift?
5 A. I spoke with Bertha Bell.
6 Q. All right. When did you
7 do that?
8 A. It was after, we were sitting
9 at the desk when we heard Dr. Fowler calling the
10 biochemist.
11 —
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Q. All right. That was the last of the unusual events that had occurred that night. What did you say to Bertha Bell?

A. Bertha asked me what was going on.

Q. And you said?

A. I don't know.

Q. Did she have any idea, any thoughts, any speculation, did anything occur to her?

A. No, she was crying, she seemed to be quite upset and just saying something is going on, what's going on.

Q. Now, you spoke to your opposite number on 4B. Did you have any conversation with the members of your own team about all these events and what they could possibly mean?

A. Janet Brownless came to me and asked me what was going on.

Q. Again in the last hour or so of the shift?

A. Yes.

Q. Yes. And you were able to tell her nothing I take it?

A. Right.

Q. Any conversation with Miss Nelles?



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A. I can't specifically remember Sue. She was busy during this time, she was writing the note, she was with Dr. Jedeikin in the room at one time and then she was preparing Justin's body and I can't specifically remember sitting down and talking to her or saying anything to her.

Q. And other than the question that you asked of Dr. Jedeikin who gave you that soothing but not very satisfactory answer, do you recall speaking to any other physician that morning about what this all meant, what was going on on your ward?

A. No. Dr. Fowler was very busy, so, I couldn't get him, but it was Dr. Jedeikin I spoke to.

Q. Do you remember that Mrs. Johnstone came back to the ward towards the end of the shift?

A. I don't recall that, no.

Q. You don't recall seeing her?

A. No.

Q. You don't recall any conversation with her?

A. No, I don't.

Q. All right. Mrs. Johnstone has given evidence here that she was indeed back at about



1
2 6 o'clock in the morning and that she spoke to you.
3 I take it you have no recollection either to confirm
4 or to deny her evidence on that score?

5 A. No, I don't.

6 Q. All right. Of all the events
7 that occurred that night and the one that I have not
8 mentioned of course is the death of Justin Cook
9 himself, was there any one that bothered you more than
10 any other or was it the entirety of the events that
11 was bothering you? Were you upset particularly by
12 any one thing?

13 A. Just the whole evening, all the
14 events that had happened that evening.

15 Q. Did you feel any particular
16 concern or puzzlement about the taking of the post
17 mortem blood from Justin Cook?

18 A. Today I can't recall that.

19 Q. You don't recall having any
20 particular reaction to that as opposed to any of the
21 other events of the night?

22 A. No.

23 Q. All right. I take it, therefore,
24 that if I were to read to you the evidence of
25 Mrs. Johnstone and Mrs. Radojewski as to the impression
that they had of your reaction of the taking of blood



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you don't have a recollection that could be of any assistance to us either as to whether you had that reaction or as to whether you did anything that could have given them that impression. You can't help us on that, can you?

A. No, just that I was asking questions of Dr. Jedeikin.

Q. Yes?

A. And the whole night was very unusual to me and I may have come across as being that way but I can't remember now how I was.

Q. You have no recollection of feeling particularly agitated about that one incident more than any other?

A. No.

Q. The drawing of blood?

A. No.

Q. All right. When you left the floor that morning, the end of your shift, did you immediately leave the hospital and go home?

A. I spoke to Liz Radojewski before leaving the floor, she came on the floor.

Q. Yes?

A. And we had a conversation in the dirty utility room and it was suggested that we



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GG 5

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go down for a cup of coffee before we leave.

3

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Q. Now, that was a Sunday morning,
was it not?

5

A. Right.

6

Q. And Mrs. Radojewski came in that
morning?

7

8

A. She was the supervisor on call
for the weekend.

9

10

Q. Okay. And you told her of the
events of the night?

11

A. Yes.

12

13

Q. All right. You say there was a
discussion in the dirty utility room?

14

A. Yes.

15

Q. And what was that discussion and
who was present?

16

17

A. Liz, myself, Janet Brownless,
Sue Nelles was there, Bertha.

18

Q. I'm sorry, and Bertha?

19

A. Bertha Bell.

20

Q. Yes. Do you recall anybody else?

21

A. No.

22

Q. Do you recall what was said in
the course of that discussion, how long did it last?

23

A. I think it took about 10 minutes.

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Q. Did you all happen to be there at the same time? How does a discussion like that come about in the dirty utility room? I mean, did you just happen to be there all at the same time or did someone say let's go and have a chat about this or what?

A. I don't know how we ended up there, it is right outside of 418.

Q. Yes.

A. And I don't know.

Q. All right. But one way or another you all found yourselves in the dirty utility room; for about 10 minutes you say?

A. Right.

Q. What's your best recollection of the discussion?

A. I can recall telling Liz what had happened, the events of the night. I started with the digoxin being locked up, I explained to her that Dr. Costigan and Dr. Mounstephen had come around and said to lock it up, it has to be double signed for now and that their pink memo will be around in the morning, or this morning, I had told her about the events of Justin Cook, I told her that Dr. Fowler was on the floor and I think basically that was it.

Q. Okay. You said all of this in the



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presence of all the other people you have identified as
being there?

4

A. Yes.

5

Q. I take it from that you were doing
the main narration to Mrs. Radojewski?

6

7

A. Well, I had given Liz my report as
to what was going on and then I had to leave and give
report to the girls.

9

Q. The day shift?

10

A. The day shift.

11

Q. Yes?

12

13

14

A. And Marie Mandal was there in
the utility room as well I think but then left shortly
after that so we could finish up report on the other
children.

15

16

Q. And what was Mrs. Radojewski's
reaction to all of this information?

17

18

19

A. She said that we wouldn't lock up
the digoxin because she would wait for a pink memo to
come around, but she was joking.

20

Q. All right.

21

22

A. She said we get it out all the
time and was going to wait for the pink memo.

23

24

25

Q. In fact, it was already locked up,
as we have heard?



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A. Yes.

3

Q. Other than that, did she have any
reaction to the other events that you described to her?

4

5

A. She was surprised about Justin
Cook's death.

6

7

Q. Was she also surprised about the
drawing of blood from his body post mortem?

8

A. I can't remember that.

9

10

Q. Do you remember anything said by
anybody else in the course of that few minutes
discussion?

11

12

A. Just that we would meet downstairs
for a cup of coffee.

13

14

Q. All right. And did you do that?

15

A. Yes.

16

Q. Who went?

17

A. Susan Nelles, myself and Liz
Radojewski.

18

19

Q. And for how long did you sit
having coffee?

20

A. It was about 20 minutes, half an
hour, we were both very tired.

21

22

Q. Did you talk about the events of
the night?

23

A. I don't think so.

24

25

G 8



1
2 Q. Do you recall any discussion
3 between the three of you as to what these events could
4 mean?

5 A. The only conversation I remember
6 is Liz asking Susan did she write down everything about
7 Baby Pacsai, did she write her notes and Susan saying
8 yes and then we talked about the weather.

9 Q. Okay.

10 Mr. Commissioner, I think I have come
11 to the end of the questions that I have about Justin
12 Cook. Clearly I am not finished in entirety my
13 examination. Do you want me to start on a new topic
14 now or shall we come back after the long weekend with
15 that?

16 THE COMMISSIONER: No, there are
17 several dirty looks in the audience if I were to do
18 that, so, we will rise I guess until 10 o'clock. Can
19 you give us some indication though how long you will
20 be?

21 MR. LAMEK: I shall finish up Tuesday
22 morning.

23 THE COMMISSIONER: You mean before
24 1 o'clock?

25 MR. LAMEK: I mean on Tuesday morning.

THE COMMISSIONER: Well, that's all the



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help I can give anybody. Well, all right then until
10 o'clock on Tuesday.

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MR. LAMEK: I hope it may be before the
break but I can't guarantee you that.

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THE COMMISSIONER: All right.

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--- Whereupon the hearing adjourned at 4:20 p.m. until
Tuesday, April 24th, 1984 at 10:00 a.m.

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